



# COTTONWOOD INSTITUTE

*"Changing the world one adventure at a time"*

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## COTTONWOOD INSTITUTE REGISTRATION FORM

Thank you for registering for this course! Please take a moment to complete this Registration Form to tell us a little bit about yourself and your background. This information is for internal use only and will be treated confidentially. This information will help our instructors get to know you before we head out into the field together, but it will also help us apply for local, state, and federal grants to fund our programs, so please complete this as accurately and honestly as possible. **Please complete this Registration Form and return it by our next class.**

### **PERSONAL INFORMATION: (FOR INTERNAL USE ONLY)**

Participant Name	Program/Course Code	Birth Date
Mailing Address	City/State	Zip Code
Daytime Phone	Evening Phone	Cell Phone
Participant Email Address	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Type of Participant <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Adult
How did you first learn about the Cottonwood Institute?	School Name (If applicable)	Do you want more information about School Credit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Ethnic Origin (Optional) <input type="checkbox"/> African-American <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other		

### **PARENT OR GUARDIAN INFORMATION: (FOR INTERNAL USE ONLY)**

Parent or Guardian Name	Relationship to Participant Above	
Mailing Address (if different from above)	City/State	Zip Code
Work Phone	Evening Phone	Cell Phone
Occupation	Employer	Work Email

### **PLEASE TELL US WHAT ARE YOU HOPING TO GAIN OR LEARN FROM THIS EXPERIENCE?**

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