



## SUMMER 2018 APPLICATION

All applications are processed on a first-come, first-served, space-available basis.

Please indicate which sessions and programs your child wishes to attend.

<b>June 11-22</b>	<b>June 25-July 6</b>	<b>July 9-20</b>
<input type="checkbox"/> Math, Marvels & More	<input type="checkbox"/> Ancient Academy	<input type="checkbox"/> Ancient Academy
<input type="checkbox"/> ECO Academy	<input type="checkbox"/> Jr. Science Searchers	<input type="checkbox"/> Jr. Science Searchers
	<input type="checkbox"/> Space Academy	<input type="checkbox"/> Space Academy
	<input type="checkbox"/> Advanced Space Academy	<input type="checkbox"/> Advanced Space Academy
		<input type="checkbox"/> Academy Americana

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Sex \_\_\_\_\_  
 Completing Grade \_\_\_\_\_ First time applicant \_\_\_\_\_ Returning student \_\_\_\_\_ Years(s) attended \_\_\_\_\_

Parent Name \_\_\_\_\_ Address \_\_\_\_\_

**Please \* the address to which all correspondence should be sent.**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: Home (\_\_\_\_) \_\_\_\_\_  
 Employer & Occupation \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_  
 Email Address \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Parent Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: Home (\_\_\_\_) \_\_\_\_\_  
 Employer & Occupation \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_  
 Email Address \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

IF PARENT CANNOT BE REACHED, CALL:

\_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Allergies or physical limitations \_\_\_\_\_

Other problems of which we should be aware? \_\_\_\_\_

Physician \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

School and District \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

How did you learn about GRC's Summer Academies? \_\_\_\_\_

Yes, I'd like to help a scholarship student attend a Gifted Resource Council Summer Academy.

I have enclosed \$ \_\_\_\_\_. Please add my name \_\_\_\_\_ to the growing list of donors.

**Total tuition is due upon acceptance or by special arrangement.**  
**Total tuition:**  
**\$490 per 2-week session**

**Fees due with application:**  
 \$150 deposit per session  
**Do you need extended day care?**  
 Mornings (\$90)  
 Afternoons (\$120)

**Fees Enclosed:**  
 Deposit \_\_\_\_\_  
 Tuition Balance \_\_\_\_\_  
 Extended Day Care \_\_\_\_\_  
 Membership (optional) \_\_\_\_\_  
 Scholarship donation (optional) \_\_\_\_\_

*Did you include test scores?*

**Please make check payable to:**  
 Gifted Resource Council  
 357 Marshall Avenue, Suite 6  
 St. Louis, MO 63119

**Questions?**  
**info@giftedresourcecouncil.org** or  
**Call 314-962-5920**

## BECOME A MEMBER OF GIFTED RESOURCE COUNCIL

Now you can participate in shaping America's future by becoming a member of Gifted Resource Council, a not-for-profit education agency serving bright and talented young people. Your tax-deductible contribution will enable us to improve existing programs, extend offerings and reach more children. Your membership will not only benefit gifted children, but also entitle you to receive the following:

**Gifted Member: \$60**

- ★ Priority registration for all programs
- ★ FREE parenting classes (\$160 value)
- ★ Use of GRC Library

**Intelligent Friend: \$100**

- ★ All of the above, plus
- ★ \$10 discount off two Learning Lab registrations

**Sharp Sponsor: \$150**

- ★ All of the above, plus
- ★ \$25 discount off a Summer Academy

**Talented Patron: \$250**

- ★ All of the above, plus
- ★ Additional \$25 discount off a Summer Academy (\$50 total)

Gifted Member  Intelligent Friend  Sharp Sponsor  Talented Patron  Brilliant Benefactor  Wise Philanthropist  Imaginative Institution

Name (as you wish your membership to be listed) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**Brilliant Benefactor: \$500**

- ★ All of the above, plus
- ★ One FREE Learning Lab course or
- ★ Learning Lab scholarship in your name at your request

**Wise Philanthropist: \$1,000**

- ★ All of the above, plus
- ★ GRC logo lapel pin
- ★ The undying gratitude of gifted children throughout the metropolitan area

**IMAGINATIVE INSTITUTION: \$100**

- ★ For schools and other not-for-profits

My employer \_\_\_\_\_ will match my charitable donation. (company name)

**Please mail check to: Gifted Resource Council, 357 Marshall Ave., Suite 6, St. Louis, MO 63119-1827**