



Colorado Association of Black Professional Engineers and Scientists  
Center

Dayton Street Opportunity

1445 Dayton Street, Aurora, CO 80010  
PO Box 200508 - Denver, CO 80220  
303.329.6251 tel  
cabpes@gmail.com  
[www.cabpes.org](http://www.cabpes.org)

# **CABPES' REGISTRATION FORM 2016-2017**

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## CABPES STUDENT MEMBERSHIP APPLICATION-SHORT FORM

2016-2017

Student Information – Please select the program(s) you want to take: <b>__JETS__MEP__SAT__Summer Math Boot Camp</b>			
Last Name	Middle Initial	First Name (No nicknames please)	
Address	School	Grade/Age /	Date of birth / /
City	State	Zip Code	
Home Phone #		Student Cell #	
Student E-mail Address		Student Facebook Contact Information	
<b>Parent(s)/Guardian’s Name</b>		Relationship to Student	
Parent(s)/Guardian’s Address		City	State Zip
Home Phone	Cell Phone	Email	
<b>Emergency contact name /(<i>relationship to student</i>)</b> /		Emergency Phone #	
Email Address			
<i>Please notify CABPES of any address, email, Facebook, or telephone number changes during the school year.</i>			

Do you participate in sports or other extracurricular activities? Yes _____ No _____	Sports / Extracurricular Activities:  1) 2) 3)	List days of week and time period for activity participation 1) 2) 3)
Have you attended the JETS program before? ___Yes ___No If Yes, how many years? _____  List all JETS classes you have previously attended. _____ _____ _____		

## JETS CLASSES

*JETS classes are held on Thursday evenings from 6:00 pm-8:00 pm*

### 2016-2017 COURSES

1. Aerospace Engineering
2. Architecture
3. Bio Engineering
4. Civil Engineering
5. Construction Management & Construction Principles
6. Lego Robotics
7. Fun with Microcontrollers
8. Environmental Engineering

### WHO CAN REGISTER?

Middle School (grades 6-8)

- Aerospace, LEGO Robotics, Construction Management & Construction Principles, Fun with Microcontrollers

High School (grades 9-12)

- Environmental Engineering, Bio Engineering, Civil Engineering

<b>Section B</b> <b>JETS RANKINGS</b> Please rank your top 3 JETS classes below
1.
2.
3.

*We certify that all of the above information is correct.*

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

**SECTION C**  
**MEP Classes**

*MEP classes are held on Monday and Wednesday evenings from 6:00 pm-8:00 pm*

MEP (4<sup>th</sup> to 12<sup>th</sup> Grade) (Students must commit to Monday and Wednesday classes)

*Indicate the course(s) in which you may need assistance. You may choose more than one.*

\_\_\_\_\_ Pre-Algebra    \_\_\_\_\_ Algebra 1    \_\_\_\_\_ Algebra 2    \_\_\_\_\_ Geometry

\_\_\_\_\_ Probability/Statistics    \_\_\_\_\_ Trigonometry    \_\_\_\_\_ Pre -Calculus/Calculus

\_\_\_\_\_ Chemistry    \_\_\_\_\_ Physics

*We certify that all of the above information is correct.*

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

**SECTION D**  
**SAT/ACT Preparation Program**

*The SAT/ACT Preparation Program is held Wednesday evenings from 6:00 pm-8:00 pm*

Have you previously taken the SAT/ACT test?     Yes     No If yes, please provide your score \_\_\_\_\_

*We certify that all of the above information is correct.*

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_



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PAYMENT FORM

Please contact Program Director Denise Walters (720.308.8848 for denise.walters@cabpes.org) prior to filling out this form if you are unable to pay the full amount before the start of CABPES programs

Registration Fees

Table with 2 columns: Program Name and Fee. Rows include JETS (\$100 per year), Math Enrichment Program (\$150 per year), and SAT/ACT Preparation Program (\$150 per year).

Late Fees

Table with 2 columns: Program Name and Fee. Rows include JETS (\$90.00), Math Enrichment Program (\$140.00), and SAT Preparation Program (\$90.00).

\*\* 15% discount for multiple classes and/or more than one sibling registered.

This agreement has been established to make arrangements to cover all fees associated with Enrollment in CABPES programs: JETS, MEP, SAT/ACT College Prep Courses. Circle all that apply and list JETS classes:

The Parents (print names) agree to the following, with payments for the following student(s):

Parent phone: Parent email:

Student Name(s)

Student Name(s)

We agree to pay 1/3 of payment upfront to confirm student(s) enrollment in program for 2016-2017 school year.

We agree to the following payment schedule for total fees of \$

The first payment will begin on day of enrollment \$ ( 13 of total cost) with payments on the following dates:

11/1/2016 \$ 13 of payment

12/1/2016 \$ 13 of payment (final)

\_\_\_\_\_

Parent(s) signature

Date: \_\_\_\_\_

\_\_\_\_\_

CABPES Representative Signature

Date: \_\_\_\_\_



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FIELD TRIP PERMISSION  
And  
PHOTOGRAPHY RELEASE FORM

Dear Parent(s):

The Colorado Association of Black Professional Engineers and Scientists (CABPES) encourage individualized and small group field trips to sites appropriate to the study of engineering, computer science, and college decision making.

I give my permission for my son or daughter to attend CABPES field trip(s).

The CABPES organization, its members, and any volunteer parents/students are not responsible for any accidents or illnesses, which may occur while my son or daughter is participating in or being transported to and from any activity. It is the parent's responsibility to inform CABPES of any special student needs or concerns.

\_\_\_\_\_  
**Print** student first and last name

\_\_\_\_\_  
Student's signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian signature

Date: \_\_\_\_\_

**Photography Release**

CABPES also captures pictures and videos of our students who participate in our math and engineering programs. If you approve of your son/daughter being photographed and/or video-taped while participating in our program, please complete this form and sign below.

I/We give permission for CABPES to use photographs and/or videos of my child for future advertisements of math and engineering programs/camps/field trips. I/We will not receive any compensation for usage of the photos or video footage.

\_\_\_\_\_  
Parent/Guardian

Date: \_\_\_\_\_