

# Summer Math Camp 2012

Do you want to keep your math skills strong over the summer?  
Are you feeling worried about your readiness for your next high school math class?  
Would you like to build a better math foundation?

If so, then the Leon Math Camp is the place for you to be. This camp will...

- Reinforce your math skills in a small group setting and allow you to become more confident for your future math classes.
- Show you how math can be fun in a non-intimidating summertime environment.
- Be an absolutely worthwhile way to spend just 10 hours of your summer.

## Camp Dates

**June 25 – June 28**

12:00p.m. - 2:30 p.m.

**OR**

**July 23 – July 26**

9:00 a.m. – 11:30 a.m.

At Leon High School

The camp will be taught by Kim Garcia, mathematics teacher Leon High School.  
The cost is **\$85**. Space is limited so sign up soon!

Mail completed registration form and a check payable to Kim Garcia to:

Leon High School  
Attn: Kim Garcia  
550 E Tennessee St  
Tallahassee, FL 32308

You will receive an email confirmation verifying the week chosen and the specific room number of the camp one week before camp begins.

This camp is most beneficial for students entering Pre Algebra, Algebra 1, Algebra 2 or Geometry.

For more information call Kim Garcia at 488-1971 x 2430 or email [garciak@leonschools.net](mailto:garciak@leonschools.net)

***No refunds will be given one week prior to the start date.***

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Participant Name: \_\_\_\_\_ June 25-28: \_\_\_\_\_ July 23-26: \_\_\_\_\_

School attending for 12/13 school year: \_\_\_\_\_ Grade 12/13 school year: \_\_\_\_\_

Math class taking next year: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

(Please print)

**Parental Waiver:** I do hereby release any and all personnel relating to Leon County Schools from any liability and/or damages as a result of participation in Leon's Summer Math Camp. I also waive all rights of entitlement concerning such loss. (You must have insurance. If you are interested in school insurance, please contact the school.)

Insurance Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

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