Application Form for Continuing Students  
Eugene Math Circle at University of Oregon, 2018-2019  
http://pages.uoregon.edu/nemirovm/emc

Student’s Name:

First Name                                            (MI)  Last Name
Preferred Name

Student’s Address:

Street                                                  City/Zip Code

Grade in 2018-19: ___

Applying to the EMC Elementary: level I __ or level II __

Applying to the EMC Upper Division: level I__ or level II__ or level III __

Parent(s) Name(s):

First Name                                              (MI)       Last Name

First Name                                              (MI)       Last Name

First Name                                              (MI)       Last Name

Parent’s E-mail (Please TYPE):

Parent 1                                                                   Parent 2

Student’s E-mail (Upper Division ONLY):

Parent’s Phone Numbers:

Parent’s or Legal Guardian’s Signature: ____________________________ Date: _________

Student’s Signature (middle/high school only): _______________________ Date: _________

Payment Information:

paying in full: $100 __ need partial scholarship: $50 __ need full scholarship: $0 __
Instructions

Mail the application form together with the payment to:
  Math Circle Coordinator
  Department of Mathematics
  University of Oregon
  Eugene OR, 97403

On your check write *Pay to Order: “UO Department of Mathematics”* and on the *memo line: “EMC, [your child’s name]”*. 

Please note that the Department of Mathematics may deposit your check immediately upon receipt.