

**BENJAMIN BANNEKER  
HONORS MATH & SCIENCE SOCIETY**

(Please complete both sides)

**Parent Data:**

**Child's Name** \_\_\_\_\_

Father/Guardian \_\_\_\_\_  
Name

Mother/Guardian \_\_\_\_\_  
Name

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Cell # \_\_\_\_\_

Cell # \_\_\_\_\_

Fax # \_\_\_\_\_

Fax # \_\_\_\_\_

E-mail Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Parent participation in programs/committees of the Society is necessary to ensure our continued success. Please check the committee(s) program(s) on which you would like to serve. Please check all that apply:

**Committees:** \_\_\_ Communication \_\_\_ Fund Raising \_\_\_ Membership \_\_\_ Academics/Technology

**Programs:** \_\_\_ Naval Academy \_\_\_ Special Events/Enrichment Activities  
\_\_\_ Awards/Scholarships \_\_\_ Economic Development

Parents, please check the subjects/programs below in which you have expertise/knowledge that you would consider sharing the students in the Society.

\_\_\_ Computers      \_\_\_ Math      \_\_\_ Science      \_\_\_ Engineering  
\_\_\_ Finance      \_\_\_ Education      \_\_\_ Other: \_\_\_\_\_

Parent's/Guardian's assessment of student's: \_\_\_\_\_  
Academic strengths      Areas in need of improvement  
(subject areas)      (subject areas)

\_\_\_\_\_  
\_\_\_\_\_

**Statement of Parental Commitment**

The Benjamin Banneker honors Math and Science Society is committed to helping young people achieve academic excellence.

As members of the Benjamin Banneker Honors math and science Society, we are committed to full participation in the programs and activities sponsored by the Society. As parents/guardians, we are willing to share our time, talents, and interests with other members of the Society. We will serve on a least one committee/program as indicated above. If we are unable to attend any function, we will notify the appropriate officials of the Society. Also BBHMSS retains the right to use your child's photo(s) for promotional purposes without compensation to the child, parent/guardian or any other representative(s).

By signing this agreement, we affirm that we will comply with the terms as set forth in this **Statement of Commitment**.

\_\_\_\_\_  
Parent(s) Guardian(s)

\_\_\_\_\_  
Date

**Benjamin Banneker**  
**Honors Math and Science Society**  
Student Registration  
(Please complete both sides)

**Please Print**

Student Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_  
Last First MI

School Name \_\_\_\_\_ Grade Level \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Home Ph. # \_\_\_\_\_

New Participant? \_\_\_\_ Yes \_\_\_\_ No    Sibling (s) in the program? \_\_\_\_ Yes \_\_\_\_ No    Name(s): \_\_\_\_\_

**Special Interests:**

Academics \_\_\_\_\_ Music \_\_\_\_\_  
Favorite Subject(s) Vocal/Instrument

Sports \_\_\_\_\_ Reading \_\_\_\_\_  
Identify Sport(s) Type/Favorite Author(s)

Organizations \_\_\_\_\_ Hobbies \_\_\_\_\_  
Name(s) Identify

Math course presently enrolled? \_\_\_\_\_

Previous middle/high school math courses: \_\_\_\_\_

MD Functional Tests (check if passed): \_\_\_\_ Math \_\_\_\_ Reading \_\_\_\_ Writing \_\_\_\_ Government

College you plan to attend: \_\_\_\_\_ Career major/interest \_\_\_\_\_

**STATEMENT OF STUDENT COMMITMENT**

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I understand that as a participant in the Benjamin Banneker Honors Math & Science Society, I am committed to striving for academic excellence. I am committed to working within the Society, with my parents and with my teachers, to set and maintain high academic standards. I understand that my positive and active participation in Society activities (at least six academic sessions annually) is an important contribution to my development within the society, therefore, I am committed to the following:

I will attend Society activities;

I will notify an appropriate official of the Society when I am unable to attend a scheduled event;

I will respect the views and opinions of others;

I will actively participate when attending an event;

I will respect the rules of the Society/MCPS; and

I will maintain appropriate behavior and abide by the guidance and directions of adult supervision during Society programs and events.

I further understand that failure to comply with all Society guidelines and maintain active participation in the Society may cause my name to be deleted from the Society mailing lists and may jeopardize my consideration for participation in future programs, events and awards of the Society.

\_\_\_\_\_  
Print Name/Student

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

\_\_\_\_\_  
Date

Benjamin Banneker  
Honors Math & Science Society  
Travel Agreement

The Benjamin Banneker Honors Math and Science Society, a non-profit corporation, its board of directors, officers, agents and/or assigns does not insure transportation to and from Society sponsored activities.

Transportation, when provided by the Montgomery County School Board will be covered under the liability insurance, which under the terms of the coverage may apply to a school sponsored activity. In no case would coverage be provided for any activity designated as non-school sponsored.

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I as parent (or legal guardian) of the student named below, or as an eligible student, give permission for the named student to be transported to and from Society activities whether by County School Board transportation or transportation provided by members of the Society.

I release, acquit, and forever discharge the Benjamin Banneker Honors Math and Science Society, its board of directors, officers, agents and/or assigns from any and all future liability resulting from any and all claims or causes of action which I now or may in the future have for personal injuries, damage to property, loss of services, medical expenses, losses or damages of any and every kind whatsoever that may arise from the transportation to and from a Society sponsored activity.

Finally, I agree to and do indemnify and save harmless the Benjamin Banneker Honors Math and Science Society, its board of directors, officers, agents and/or assigns from all claims or causes of action in connection with all transportation related to the activity.

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Student: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Legal  
Guardian: \_\_\_\_\_ Date: \_\_\_\_\_