

# Science Saturdays

at The Ohio State University

---

---

---

**Come explore with 4-H and connect with the scientists and researchers at OSU who do amazing science stuff everyday!**

**February 4 – Cool Chemistry!**

Join Angie Miller from OSU's Department of Chemistry and the Biochemistry Demonstration Lab for a great science show! We'll have exciting and popular chemistry demonstrations and a hands-on program including pen chromatography and making ice cream with liquid nitrogen! Come experience some (way) Cool Chemistry!  
*Please note: two sessions will be offered: 8:30-10 a.m. and 10:30-noon, each limited to 24 participants.*

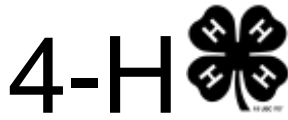
4-H Science Saturdays are for kids in grades 3-6 who want to discover new things and learn by doing. Programs are held at Nationwide & Ohio Farm Bureau 4-H Center. The cost is \$5 per child. Preregistration is required; complete the information form on reverse.



**THE OHIO STATE UNIVERSITY**  
COLLEGE OF FOOD, AGRICULTURAL,  
AND ENVIRONMENTAL SCIENCES

The Nationwide & Ohio Farm Bureau 4-H Center is located at 2201 Fred Taylor Drive on the OSU campus across from the Schottenstein Center

Questions?  
Contact Sally McClaskey at  
[mcclaskey.12@osu.edu](mailto:mcclaskey.12@osu.edu)  
614-247-8141



# Science Saturdays

## at The Ohio State University

Mail your completed registration form and return with fees to  
Sally McClaskey, Ohio 4-H Center, 2201 Fred Taylor Dr., Columbus OH 43210-1156  
**Make check payable to *The Ohio State University*.**

First child's name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Second child's name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Mobile phone \_\_\_\_\_

Parent name \_\_\_\_\_ Parent email \_\_\_\_\_

4-H member? (circle) Yes No      4-H County \_\_\_\_\_

Fee is \$5 per child. # Attending \_\_\_\_\_ X \$5 = \_\_\_\_\_ Amount Enclosed

List preferred time. Confirmation of time will be sent upon receipt of registration form:

8:30 – 10 a.m. \_\_\_\_\_

10:30 a.m. – noon \_\_\_\_\_

Name & Phone of Emergency Contact during event

List any pertinent medical/health concerns

I give The Ohio State University permission to publish in print, electronic or video format the likeness or image of my child. I release all claims against the University with respect to copyright ownership and publication including any claim for compensation related to use of the materials.

Minor's Name \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Signature \_\_\_\_\_