

ONE REGISTRATION FORM PER STUDENT
DO NOT COMBINE CHECKS!



SUMMER ACADEMY REGISTRATION FORM

This form must be completed each month and returned to school with payment attached. Checks will only be accepted.

Please complete one registration form and attach one check for the Summer Academy.

Program Registering for: SUMMER ACADEMY

Student Information:

Student Name: _____

Teacher: _____ Grade: _____ Age: _____

Is the Student enrolled in Summer Camp? Yes _____ No _____

Parent/Guardian Information:

First Name: _____ Last Name: _____

Email: _____ Phone Number: _____

Emergency Contact Name: (other than listen above)

First Name: _____ Last Name: _____

Relationship to Student: _____ Phone Number: _____

Additional Information

Allergies or pertinent information regarding student: _____
_____.

Enrichment programs are non-refundable, except for hospitalization or the cancellation of a program. Parents must enter the office to pick up students at their enrichment dismissal time. Students must be picked up promptly. Students who are not picked up on time will be charged a late pick-up fee. I have read the program procedures and agree to the guidelines above.

Parent/Guardian Signature: _____ Date: _____

Office Use Only:

Payment: Check # _____ (Checks only) Amount Paid: _____ Received by: _____