

# REGISTRATION FORM



June 17, 2019 - July 12, 2019

## STUDENT INFORMATION

- ✓ Name (first and last): \_\_\_\_\_
- ✓ Nickname (if any): \_\_\_\_\_
- ✓ Current Elementary School: \_\_\_\_\_
- ✓ Date of Birth: \_\_\_\_\_
- ✓ Grade in Fall 2019: \_\_\_\_\_
- ✓ **I would like to purchase a Tee Shirt for \$10:**

Adult Small    Adult Medium    Adult Large    Extra Large

## FAMILY INFORMATION

Parent/Guardian First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Parent/Guardian First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Child's primary address while at The Summer Arts Academy: Street: \_\_\_\_\_  
City: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

Primary Parent/Guardian Phone Number: \_\_\_\_\_



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Other than the parent/guardian listed above, who is authorized to pick up your child?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## EMERGENCY INFORMATION

Medical Insurance Provider and/or Doctor: \_\_\_\_\_

Medical Insurance Policy # \_\_\_\_\_

Medical Insurance and/or Doctor Office Phone Number: \_\_\_\_\_

In case of an emergency and the parent/guardian can't be reached, please list other adults who can be contacted. Please include their names, phone numbers, and the relationship to the child.

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

✓ **Does your daughter have any allergies? If so, please name them.**

## PAYMENT

The registration fee can be paid below. To pay by phone, cash, or check please call Mrs. Sosa in the Business Office M-F 8am- 3:30pm at (626) 282-3181 x107.

### Fees:

- I would like to register only for The Summer Arts Academy - \$150 (M-F 8am – 1:00 pm)
- I would like to register only for HSPT Prep - \$60 (M-TH 1:30pm – 3 pm)
- I would like to register both The Summer Arts Academy and HSPT Prep - \$210 (M-TH 8am - 3pm, F 8am-1:00pm)

Credit Card  VISA  Mastercard

Credit Card Number \_\_\_\_\_

Billing Address \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_