



2021 Summer Program Registration

Email address: _____

Student Name: _____

Home Address: _____

Parent/Guardian Name: _____

Phone Number: _____

Student's Birthday: _____

Grade of Student for 2020-21 School Year (Current Year) : _____

Registering for: (Please check box below program logo.)



July 6-July 15
Monday-Thursday

Is bus transportation needed? _____

If yes, morning, afternoon, or both? (Please circle one.)

MORNING **AFTERNOON** **BOTH**

Does your child have a food allergy? _____

If so, what is your child's allergy? _____

Do we have permission to photograph your child for social media or print media? Please circle one.

YES **NO**

Deadline for registration: April 30, 2021



2021 Summer Program Registration

Email address: _____

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Home Address: _____

Parent/Guardian Name: _____

Phone Number: _____

Student's Birthday: _____

Grade of Student for 2020-21 School Year (Current Year) : _____

Registering for: (Please check box below program logo.)

☐

June 7-July 15
Monday-Thursday

☐

June 7-July 15
Monday-Thursday

Is bus transportation needed? _____

If yes, morning, afternoon, or both? (Please circle one.)

MORNING

AFTERNOON

BOTH

Does your child have a food allergy? _____

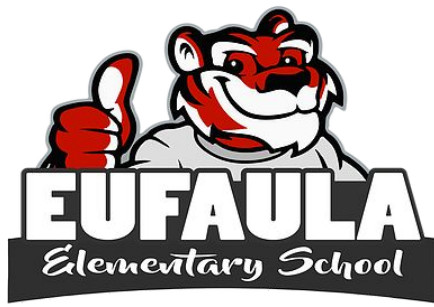
If so, what is your child's allergy? _____

Do we have permission to photograph your child for social media or print media? Please circle one.

YES

NO

Deadline for registration: April 30, 2021



2021 Summer Program Registration

Email address: _____

Student Name: _____

Home Address: _____

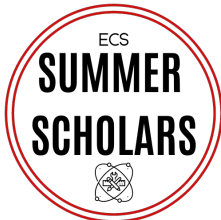
Parent/Guardian Name: _____

Phone Number: _____

Student's Birthday: _____

Grade of Student for 2020-21 School Year (Current Year) : _____

Registering for: (Please check box below program logo.)

☐

June 7-July 15
Monday-Thursday

☐

June 7-July 15
Monday-Thursday

☐

June 6-July 15
Monday-Thursday

Is bus transportation needed? _____

If yes, morning, afternoon, or both? (Please circle one.)

MORNING

AFTERNOON

BOTH

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YES

NO

Deadline for registration: April 30, 2021



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Student Name: _____

Home Address: _____

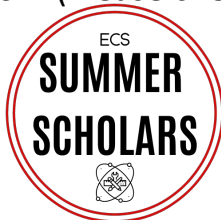
Parent/Guardian Name: _____

Phone Number: _____

Student's Birthday: _____

Grade of Student for 2020-21 School Year (Current Year) : _____

Registering for: (Please check box below program logo.)

☐

June 7-July 15
Monday-Thursday

☐

June 7-July 15
Monday-Thursday

☐

June 21-July 1
Monday-Thursday

Is bus transportation needed? _____

If yes, morning, afternoon, or both? (Please circle one.)

MORNING

AFTERNOON

BOTH

I am registering for:

_____ Drama Camp

_____ Project Based Learning Camp

Does your child have a food allergy? _____

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YES

NO

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Email address: _____

Student Name: _____

Home Address: _____

Parent/Guardian Name: _____

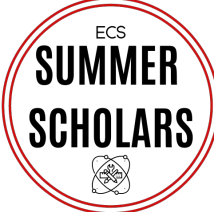
Phone Number: _____

Student's Birthday: _____

Grade of Student for 2020-21 School Year (Current Year) : _____

Registering for: (Please check box below program logo.)


Choose the program you are registering for and circle the dates you will be attending.


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Session 1: June 7-July 1
Session 2: July 6-July 29
Both Sessions


☐

June 7-July 15
Monday-Thursday


☐

I am registering for:
☐ Drama Camp July 12-15
☐ Biotechnology June 21-24
☐ Robotics July 5-8
☐ Agriscience July 5-8
☐ Music June 14-17
☐ Resumes and Cover Letters June 14-17
☐ Law and Order June 21-24
☐ Fitness and Conditioning June 28-July 1
☐ Psychology July 5-8
☐ Job Interview Skills July 26-29
☐ Extended Black History July 19-22
☐ Creative Writing June 7-10
☐ Murals July 12-15
☐ Drivers Ed July 6-July 29
☐ Credit Advancement June 7-July 29
☐ Foreign Language June 7-July 29

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AFTERNOON

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