Vacation Dates _____

K-8 P.T. Affiliates Summer School @ Huntington Middle School
GRADES K- 8 Registration Form
Mail to: K-8 P.T. Affiliates, 2701 Huntington Drive, San Marino, Ca. 91108
Questions: Before June 14 (626) 299-7047 After June 14 (626) 299-7060 Ext. 2
*** * * Student Information – Please PRINT Neatly – ALL information must be complete to register. * * ***

Name of Student _____ Age _____
Last First Middle

Address _____ (_____)_____
Street City Zip Code Home Phone

Grade this August _____ School this August _____ Current School _____

Father's Name _____ Mother's Name _____

Dad's Cell Phone (_____) _____ Mom's Cell Phone (_____) _____

Father's Work Phone (_____) _____ Mother's Work Phone (_____) _____

In an Emergency if Parent Can't be Reached call _____ (_____) _____
Name Phone

If no contact can be made, in the event of an emergency I authorize medical care from the emergency hospital or

Dr. _____ (_____) _____ _____
Name Phone City

_____ _____
Parent/Legal Guardian Signature Date

PLEASE ENROLL THE STUDENT IN THE FOLLOWING COURSES:

(If an alternate choice is listed and the first choice is closed, the student will automatically be enrolled in the alternate choice. Failure to list an alternate choice may delay registration if the first is closed.)

June 14 – July 23 (July 5 is a holiday)
1 Class = $375 2 Classes = $500 Block Class = $500

Period 1 8:30 – 10:00 AM

	Class Title	Materials Fee
1st Choice	_____	_____
Alternate Choice	_____	_____

IMPORTANT
For student safety, please report absences to (626) 299-7060 Ext. 1

Period 2 10:15 – 11:45 AM

	Class Title	Materials Fee
1st Choice	_____	_____
Alternate Choice	_____	_____

Block Class (Per 1 & 2) 8:30 – 11:30 or 11:45 AM – If this is selected, **DO NOT make a first choice in the above periods 1 or 2**

	Class Title	Grade	Materials Fee
1st Choice	_____	_____	_____
Alternate Choice	_____	_____	_____

********** FOR OFFICE USE ONLY **********

Check # _____ Amount _____ Postmark Date _____ Received by _____ Comp Entry _____

Amount Due if Incomplete: Tuition _____ Materials Fee _____ Refund Amount _____ Date _____