



Summer Enrichment Registration

Student Name: _____

Address: _____

Date of Birth: _____ Sex: M F Entering Grade: _____

Please list any allergies or health concerns: _____

Mother's Name: _____

Cellular Phone #: _____ Work Phone #: _____

E-mail address: _____

Father's Name: _____

Cellular Phone #: _____ Work Phone #: _____

E-mail address: _____

In the event the parents cannot be reached, please call:

Name: _____ Phone #: _____

Relationship to child: _____

The Summer Enrichment Program will run from Monday, June 19th through Friday, July 14th. Hours will be from 8:00am –12 noon. Drop off begins at 7:45am.

There will be NO CLASS on Tuesday, July 4th.

The total amount of the program is \$700; payable to St. Brendan Elementary Catholic School and due in full by June 19th.

Registration Fee of \$125 is due with completed form to secure a spot. Fee covers all supplies and activities for the course of 4 weeks.

Parent Signature: _____ Date: _____