Out-Of-District Summer Learning Enrollment Form

*_____ *_____ *_____ *_____

LAST name, Legal first name Legal middle name Used first name

*Date of Birth: _____ * _____

MM / DD / YY Country of Birth

3DUHQW RU *XDUGLDQ¶V (PDLO BBBB

PARENT Consent

PLEASE PRINT CLEARLY

STUDENT NAME:_____

PARENT/GUARDIAN NAME: _____