



METCO, Inc. Summer School Academic Program

REGISTRATION FORM

(Please Print or Type)

Student Name: _____ Date of Birth: _____ Gender _____

Address: _____
Street City State Zip Code

METCO District: _____

Grade Entering in September 2017: _____ Does the student have an IEP? YES _____ NO _____ (if yes, please submit a copy)

Has the student been asked to repeat the year? YES _____ NO _____

Will your child need to attend the Extended Day program? YES _____ NO _____

PARENT/GUARDIAN INFORMATION

Mother/Guardian: _____ Father/Guardian: _____

Address: _____ Address: _____

Phone #: _____ Work #: _____ Phone #: _____ Work #: _____

Cell Phone: _____ Cell Phone: _____

Email: _____ Email: _____

Please list below at least ONE Emergency Contact who is authorized to pick up your child during program hours.

Emergency Contact: _____ Emergency Contact: _____

Address: _____ Address: _____

Phone #: _____ Work #: _____ Phone #: _____ Work #: _____

Cell Phone: _____ Cell Phone: _____

Relationship to student: _____ Relationship to student: _____

PAYMENT INFORMATION

- The total fee for the summer school academic program is \$600.00. The Extended Day program is an additional \$400.00.
- A **\$120.00 NON-REFUNDABLE** deposit is required at the time of registration.