

Alton High School – Summer School 2019 – Registration Form

Students may not miss more than 3 days unless they have approval from the principal, Mr. Bellm, before summer school begins.

Students may not take a class unless they have transportation immediately before and after class every day. No busing will be provided. Auto Safety students must have a ride to and from summer school at their class times. **Students may not wait at school beyond classes.**

Student Name: _____ (please print)
Last Name First Middle Initial

Address: _____ City: _____ Zip _____

Student's Birth Date: _____ Gender: Male Female (circle one)

Grade Level now (before summer school) 8 9 10 11 12 (circle one)

Name of School Attended **before** summer school _____

Name of School Attending **after** summer school _____

Parent/Guardian Name: _____ (please print)
Last First Middle Initial

Contact Info. _____ or _____
Primary phone # Alternate phone #

E-mail address: _____

Emergency Contact Name & Phone # _____

PARENT/GUARDIAN SIGNATURE: _____

1st Class Request: _____ Time: _____

2nd Class Request: _____ Time: _____

Have you applied for a summer school scholarship? (Circle One) Yes No

COUNSELOR'S SIGNATURE: _____

----- For Office Use Only – Please Do Not Write Below This Line -----

Amount Paid: _____ Cash or Check Check #: _____

Date: _____ Initials: _____

Name on Check (if different from student): _____