

**ONLINE COLLEGE ESSAY WRITING CLASS
2021 REGISTRATION FORM**
June 28-July 2, July 12-16, July 19-23, July 26-30 or August 2-6

| | | |
|----------------------------|-----------------------|--------------------------|
| Student's Last Name: | Student's First Name: | Student's Date of Birth: |
| Street Address: | | |
| City: | State: | Zip Code: |
| Parent #1/Guardian's Name: | Primary Phone: | Email: |
| Parent #2/Guardian's Name: | Primary Phone: | Email: |
| Current School: | | Grade in August 2020: |

My child will attend (check one):

June 28-July 2: ___ July 12-16: ___ July 19-23: ___ July 26-30: ___ August 2-6: ___

Acknowledgements

We have read and understand all the policies outlined previously and agree to follow them fully. By typing your name below, we consider this your electronic signature.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Payment Information: Registration is on a first-come, first-served basis. Please read carefully the information in the FEES section on the first page.

_____ Enclosed is my check or money order (payable to SMMEF) for \$500.

_____ Please charge my credit card (\$500, \$200 or \$100 plus 3% credit card charge).

_____ VISA _____ MC _____ AMEX

Card Number _____ Expires _____ CVV _____

Names as it appears on card: _____

Billing address if different from above: _____

_____ I want to help sponsor a scholarship student. My donation is included in the enclosed check or you may charge an additional \$ _____ to the above account.

_____ Student qualifies for the SMMUSD free-lunch program. My \$100 fee payment is enclosed.

_____ Student qualifies for the SMMUSD reduced-lunch program. My \$200 fee payment is enclosed.

