

**Roberto Clemente Middle School (School # 157)
Summer School Registration**

Instructions: Please complete, sign and return to Ms. Botchway or Mrs. Mahon Middle School by _____

PART I: To be completed by PARENT/GUARDIAN. PLEASE PRINT ALL INFORMATION.

Student MCPS ID Number	Race/Ethnic Group (Enter number)	Gender (Enter number)	Date of Birth
<input type="text"/>	1. American Indian or Alaskan Native <input type="checkbox"/> 3. African American <input type="checkbox"/> 2. Asian or Pacific Islander <input type="checkbox"/> 4. White <input type="checkbox"/> 5. Hispanic <input type="checkbox"/>	1= Male <input type="checkbox"/> 2=Female <input type="checkbox"/>	<input type="text"/>
Student's Last Name	First Name	MI	Age _____ Does this student have: An IEP? Yes <input type="checkbox"/> No <input type="checkbox"/> An ELL Plan? Yes <input type="checkbox"/> No <input type="checkbox"/> A 504 Plan? Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parent/Guardian's Last Name	First Name	MI	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone: Home	Work		
<input type="text"/>	<input type="text"/>		
Area Code	Area Code		
<input type="text"/>	<input type="text"/>		
Address _____	Street	City	State ZIP
Emergency Contact: Name _____	Phone: H (____) _____	W (____) _____	
Name of Home School now attending _____			
Method of Transportation to Summer School: Walk <input type="checkbox"/>	School Bus <input type="checkbox"/>	Parent Drop-off <input type="checkbox"/>	Other <input type="checkbox"/> Specify _____
Method of Transportation from Summer School: Walk <input type="checkbox"/>	School Bus <input type="checkbox"/>	Parent Drop-off <input type="checkbox"/>	Other <input type="checkbox"/> Specify _____

PART II: REGISTRATION- Please check the applicable course offering.

Intervention Math A (Course #0232) (Incoming 6 th Graders) <input type="checkbox"/>	Focus on Math B (Course #0241) (Incoming 6 th Graders) <input type="checkbox"/>	Intervention Reading 6 (Course #0221) (Incoming 6 th Graders) <input type="checkbox"/>
Intervention Math B (Course #0234) (Incoming 7 th Graders) <input type="checkbox"/>	Focus on Algebra (Course #245) (Incoming 6 th , 7 th , and 8 th Graders) <input type="checkbox"/>	Intervention Reading 7 (Course #0223) (Incoming 7 th Graders) <input type="checkbox"/>
Intervention Math C (Course #0236) (Incoming 8 th or Exiting 8 th Graders) <input type="checkbox"/>	Lights, Camera, Literacy (Incoming 6 th Graders) <input type="checkbox"/>	Intervention Reading 8 (Course #0225) (Incoming 8 th or Exiting 8 th) <input type="checkbox"/>
Intervention for ESOL (6 th , 7 th , 8 th Graders) <input type="checkbox"/>	Lights, Camera, Literacy (Incoming 7 th and 8 th Graders) <input type="checkbox"/>	

PART III: TUITION PAYMENT – Attach check, money order, or credit card information for the FULL TUITION amount.

- See the *MCPS Summer School Brochure* for tuition information.
- Student may qualify for a tuition waiver. To apply, complete and attach to this registration form MCPS form 325-4: *Application for Partial or Full Waiver of Summer School Tuition.*

Method of Payment

- Check # _____ Amount \$ _____ (U.S. funds only) (Make check payable to Montgomery County Public Schools. Include Student name, ID number, and school name on checks.)
- Money Order # _____ Amount \$ _____ (Make payable to Montgomery County Public Schools.)
- Cash \$ _____ Do not mail. Walk in only. Charge \$ _____ to my (check one) MasterCard Visa
(Please indicate credit card number and expiration date with charge orders.)

Card Number <input type="text"/>	Expiration Date <input type="text"/>
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Refunds:

- One day's attendance makes a student ineligible for a refund. An exception to this is for the student who attends less than one week and must withdraw because of hospitalization or home confinement for personal illness.
- All requests for tuition refunds must be made prior to the last day of the student's summer program. (See *MCPS Summer School Course Brochure* for details on the refund process.)

PARENT'S/GUARDIAN'S SIGNATURE: Parent's/guardian's signature certifies that:

- Student has met all immunization requirements.
- Method of payment is assured and it is understood that a \$25.00 fee will be assessed for returned checks or denied credit card charges.
- The parent/guardian will inform the summer school coordinator of any special accommodations required for the student.
- The student will comply with all rules and regulations of MCPS and the middle school summer school site.
- The parent/guardian understands that this highly concentrated program necessitates consistent attendance. Therefore, parent/guardian and students commit to making full time attendance a priority.
- Excessive absences may be cause for removal from the summer program.

Signature _____ Date _____
Parent/Guardian