Part 1

REGISTRATION FORM - MIDDLE SCHOOL U - STOUGHTON - 2008

Student's Name _____ Birthdate _____ Age ____ Sex ____ Grade in Fall 2008 _____ School attending in Fall 2008 _____

Student attended: Summer Camps 2007 and/or the 2007-2008 AFTER SCHOOL program? ☐ Yes ☐ No

Student resides with: ☐ Mother ☐ Father ☐ Guardian

Mother or Guardian	Father or Guardian
Address	Address
City/State/Zip	City/State/Zip
Day Phone / Home Phone / E-Mail Address	Day Phone / Home Phone / E-Mail Address
Name of workplace/ Complete Address	Name of workplace/ Complete Address

Student's departure is to be as follows (please inform the MSU Director in writing of any changes).

☐ Student may walk home after the course for which he/she is registered. Departure time(s)_____

☐ Student is to wait for an authorized pick-up person; list names other than parents below. Unless otherwise noted, parents listed above are considered authorized pick-up and emergency contact persons.

Additional pick-up persons and contact information may be written on the back of this form.

	Name	Day Phone #	Address	Relationship To Student
1.				
2.				

DIRECTIONS: Indicate first and second choice by writing the course name in the appropriate area below. Individual course fees are listed in the brochure.
*Note: No courses, Friday, July 4. *Due to no classes on July 4, all classes this week will run an additional half-hour.*.

Dates	Morning Course 8:30 - 11:30 a.m.	All-Day Course 8:30 a.m. - 4 p.m.	Afternoon Course 1 - 4 p.m.
July 14-18	1	1	1
	2	2	2
July 21-25	1	1	1
	2	2	2
July 28 – Aug. 1	1	1	1
	2	2	2
Aug. 4 - 8	1	1	1
	2	2	2
Aug. 11 - 15	1	1	1
	2	2	2
Aug. 18-22	1	1	1
	2	2	2

Please check if you would like more information about the following programs: ___ AFTER SCHOOL Day Camps ___ Generation Tours ___ Wander Wisconsin

Date Received _____ Amount Paid _____ Check # _____ Visa/MC_____ Received by _____