

Summer Academy 2009
Registration Form
Registration Deadline: July 8, 2009

Student Name: _____

Street Address:	_____
City, Zip Code:	_____
Mailing Address (if different):	_____
City, Zip Code:	_____

Grade/School (2008-09) _____ (next year or 2009-10) _____

Parent/Guardian _____

Home Phone _____ Work/Cell Phone _____

e-Mail Address* _____

*Required for Online Classes; Requested for confirmation of registration

Emergency Contact *(if Parent/Guardian is not available during Summer Academy)*

Name _____ Relationship _____ Home Phone _____

Work/Cell Phone _____


COURSE #1 (Onsite or Online):	\$
_____	_____
COURSE #2 (Online):	\$
_____	_____
	Total \$

Full payment must be made at the time of registration.

We accept checks, money orders, and exact cash. Checks and Money Orders should be made payable to CKSD.

TRANSPORTATION PLAN

Please provide plan details and review with your student.



Student will drive or be driven

Student will ride the bus AM pick-up: _____ PM drop-off: _____

Scheduled Bus Stops:

BR-Brownsville, CC-Clear Creek, CO-Cottonwood, CV-Cougar Valley, EM-Emerald Heights, EsqH-Esquire Hills, GM-Green Mountain, JP-Jackson Park, PI-PineCrest, SI-Silverdale, WO-Woodlands, and CKHS-Central Kitsap High School