



2009 High School Summer School

ENROLLMENT APPLICATION

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: Check one. Indicate zip code if your address is GAINESVILLE.

- \_\_\_\_\_ Gainesville (\_\_\_\_\_) \_\_\_\_\_ Flowery Branch 30542 \_\_\_\_\_ Oakwood 30566
\_\_\_\_\_ Murrayville 30654 \_\_\_\_\_ Clermont 30527 \_\_\_\_\_ Lula 30554
\_\_\_\_\_ Braselton 30517 \_\_\_\_\_ Chestnut Mtn. 30502 \_\_\_\_\_ Gillsville 30543

Name of Parent: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Home phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Name of Emergency Contact Person: \_\_\_\_\_

School Enrolled In This Year 2008-2009: \_\_\_\_\_

Are you served in a resource program during the regular school year? \_\_\_\_\_ (yes or no)

Will you graduate at the end of the summer school program: \_\_\_\_\_ (yes or no)

Course Desired (Give Specific Name)

Course Title:

Grade Level of Course

\_\_\_\_\_
\_\_\_\_\_

Early Registration (ends 5/22) \$175.00

Regular Registration \$200.00

No out of county students accepted

Counselor's Signature

Make checks/money orders payable to Hall County Schools

OFFICE USE ONLY

Behavior Contract Returned: \_\_\_\_\_

Payment: \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_ \_\_\_\_\_ Money Order# \_\_\_\_\_

Receipt # \_\_\_\_\_ Amount of Payment \$ \_\_\_\_\_

Official's Signature: \_\_\_\_\_