

# READERS-WRITERS SUMMER WORKSHOP

*www.r-wsw.org*

## Student Registration Sheet

Please check one of the following programs:

(all 3 schools)

(St.Paul's & Terry Fox only)

           **ENGLISH**

**OR**

           **FRE.IMMER.**

(k-6)

(cycle 2 & 3, gr. 3-6)

Please complete and return in an envelope with a deposit of \$50.00

(by May 16, 2008)

and a post dated cheque for the balance by June 13, 2008.

Point of Service: \_\_\_\_\_

Student's Name: \_\_\_\_\_ age Aug. 1 \_\_\_\_\_

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

Medicare card #: \_\_\_\_\_ exp.date \_\_\_ / \_\_\_

Allergies (if any): \_\_\_\_\_

Parent/Guardian (print): \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work \_\_\_\_\_

Cell: \_\_\_\_\_ Emer: \_\_\_\_\_

e-mail: \_\_\_\_\_ @ \_\_\_\_\_

Student's present school: \_\_\_\_\_ grade \_\_\_\_\_

Teacher: \_\_\_\_\_

Parent/ Guardian signature: \_\_\_\_\_ date: \_\_\_\_\_

9:00 A.M. to NOON, from **JULY 28 TO AUG. 15, 2008**

### For Office Use Only

Comments :

DATE	PAYMENT	CHEQ #	CASH	BALANCE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____