

# SUMMER SCHOOL 2025 REGISTRATION FORM

Must be Completely Filled Out

STUDENT NAME (Print) \_\_\_\_\_  
Last First

Current School \_\_\_\_\_

Grade level as of Fall 2024 (please circle): 5, 6, 7, 8, 9, 10, 11, 12

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Student Email \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent Email \_\_\_\_\_

Emergency Name \_\_\_\_\_

Emergency Relationship \_\_\_\_\_

Emergency Phone \_\_\_\_\_

The undersigned parent/guardian of the above named minor student hereby authorizes any medical exam or treatment in the event of serious illness or injury if parent/guardian cannot be contacted, releasing Crespi Carmelite High School from any liability.

It is the policy of Crespi Carmelite High School that any student copying homework, lab assignments, class work or tests will not receive credit for that work.

Inappropriate language and disrespectful behavior at school will not be tolerated. Parents and students will be required to sign a behavior contract.

I have read the above and agree to the stated policy.

\_\_\_\_\_  
Parent/Guardian Signature

Courses Requested:

Course Name \_\_\_\_\_

Course Name \_\_\_\_\_

Tuition & Fees Due: \$ \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_

Amount Outstanding: \$ \_\_\_\_\_

Check # \_\_\_\_\_