

2017 NCSD SUMMER SCHOOL REGISTRATION

NAME	STUDENT NUMBER
ADDRESS	PHONE NUMBER
SCHOOL	
PARENT NAME	
<input type="checkbox"/> I understand there will be no refunds for lack of attendance or non-completion of the course. Init PARENT SIGNATURE:	

COURSE REQUESTED

SEMESTER

1	\$50	
2	\$50	
3	FREE UPON COMPLETION OF 2	

PAYMENT RECEIVED

\$50	DATE	CASH / MO
\$50	DATE	CASH / MO