



MIA Summer School

July 6 – July 30, 2009

REGISTRATION FORM

Father's name (first, last) -----

Email address -----

Mother's name (first, last) -----

Email address -----

Phone number home ----- cell -----

My child has special medical need No Yes, -----

Registration form received on -----

| Students' name | Age | Level ⁱ | Number of weeks ⁱⁱ |
|----------------|-----|--------------------|----------------------------------|
| 1. ----- | --- | --- | 4 or -- Week(s), the ----- |
| 2. ----- | --- | --- | 4 or -- Week(s), the ----- |
| 3. ----- | --- | --- | 4 or -- Week(s), the ----- |

ⁱ Level 1, 5-6 years old; Level 2, 7-8; Level 3, 9-11; Level 4, 12+

ⁱⁱ If you are not enrolling your child in the full program (4 weeks), please write down (a) the number of weeks and (b) the preferred week(s) (for example 2 Week(s), the 2nd, 4th)