

REGISTRATION

Milton Summer School Program Academic Make-Up

Grades 4-6 | Northside Intermediate School | June 11-July 6
Grades 7-8 | Milton Middle School | June 11-July 6

Registration

Registration forms can be mailed in or dropped off at the Summer School Office. The mailing address for the Milton Summer School Program is PO Box 476, Milton, WI 53563. The Summer School Office is located at the high school. In order to process a registration, the registration form must be filled out completely and any applicable non-resident fees paid. The information on this form needs to match the information at your child's school that he/she attends during the school year.

If you have any registration questions, please contact Sarah Warren: (608) 868-9575 or warrens@milton.k12.wi.us

Student Information

Legal Name: _____ Gender: M / F Date of Birth: _____

Address: _____
Last First Street/City/State/Zip Township/City of: _____

Current School: _____ Teacher: _____ Grade Fall 2018: _____

Does your child require special services during the school year: Yes / No

If so, please explain: _____

Parent/Guardian Information

Name(s): _____

Home Phone: _____ Cell Phone: _____ Email Address: _____
Schedule will be sent to this address.

Emergency Information

Emergency Contact 1: _____
Name/Relationship/Morning Phone Number

Emergency Contact 2: _____
Name/Relationship/Morning Phone Number

Are there any medical conditions we need to be aware of: Yes / No

If so, please explain: _____

If medical attention is necessary, I agree to have my son/daughter taken to a medical facility and to have medical attention rendered as deemed necessary by the attending physician: Yes / No _____

Parent/Guardian Signature

Course Selection

Session 1 runs from 8:15-9:45 a.m. and Session 2 runs from 10:00-11:30 a.m.

Course Name:	
Course Name:	

Required Signatures

We have read and understand the attendance policy for the summer school program:

Parent/Guardian Signature

Student Signature

Date