

ISM Sunday school

School year 2010-2011

REGISTRATION FORM

Family Information

Last Name: _____ FirstName: _____ Mother/Father

Address _____ City _____ State _____ Zip _____

Home Phone: _____ - _____ - _____ Cell: _____ - _____ - _____

Email: _____

Emergency Contact: Name: _____ Phone: _____

Student Information

# of Students	Name	Gender	Date of birth
1			
2			
3			
4			
5			

Tuition: \$300.00/child
(\$550/2 children, \$750 max/family)

Donation for school: \$ _____

Parent /Guardian Signature _____ Date: _____

INSTRUCTIONS: PLEASE MAKE CHECKS PAYABLE TO "ISM" AND WRITE YOUR PHONE NUMBER ON THE CHECK.

First day of School: September 26, 2010 **/Time:** 10:45 AM- 2: 00 PM