

## Class Sign-Up

Name \_\_\_\_\_ Advisor \_\_\_\_\_ Grade \_\_\_\_\_

Please fill out this form with the classes you would like for your child. Hand it in to the front desk, email to Brittany (be sure to electronically sign below) or FAX it to us by August 5, 2011 at 3 PM (please call to confirm that faxes go through). Please make a copy and keep it for your records before you hand it in to the front desk. (Fill out one form per child)

**Due to large the popularity of some arts, dance, and music classes we would like you to please mark your classes with your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup>, top choices. We will work to make sure that as many students get classes as possible. Please complete all portions of the form. ☺**

Name Of Class	Priority (1, 2, 3)	Class Level	Day (s)	Time	Grade Levels
1.					
2.					
3.					
4.					
5.					
6.					
7.					
<b>7 class limit- list second choices</b>					
1.					
2.					
3.					

We will ONLY notify you if any changes are made to your child's schedule. You will NOT receive confirmation of the classes that your child gets accepted into, this schedule is you confirmation, unless a class is not available and you are notified.

I, the parent/guardian, understand that it is my responsibility to make sure transportation for my student is provided between all classes with a maximum wait time for him/her of 20 minutes (waiting for classes or a ride by the front desk in the P.A.C.T. office). My 6th – 8th grader may have a longer wait time as long as he/she is being supervised while working quietly and productively in the library. I understand that failure to comply with this policy will result in a referral. Any 3 referrals will result in a loss of class privileges for the remainder of the current semester.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_