

2017 CCHS Summer School Registration

May 29 – June 8 and July 30 - August 3rd

Transportation is not provided

Make registration checks payable to Clear Creek High School

Cash or personal checks will be accepted.

For more information call Jeff Miller or Emma Phipps @ 303/679-4600

ALL information is required.

Please print legibly:

Student's Name _____ Last Grade Completed _____

Parent's Name _____

Mailing address (Street or PO Box, City, Zip) _____

Home phone _____ Parent Cell _____ Parent Work phone _____

Parent email _____

Student email _____

Emergency Contact Name (When parent cannot be reached) _____

Relationship to student _____

Phone _____

Course information:

Course(s) required for summer school: (Maximum of 2 courses; \$200 for one course \$375 for two courses)

1) _____ 2) _____

Session (choose one):

8:30am-10:30am _____

10:30am-12:30pm _____

Parent orientation (Required)

Please check the May 29 orientation parent will attend. (Please allow one hour):

8:00am 6:00pm

Total tuition enclosed: \$ _____

Note: Failure to complete the above information may result in a student to be registered in the wrong course. Registration will not be accepted without payment. Please make checks payable to Clear Creek High School.

By my signature below, I indicate that I understand that my son/daughter is required to attend from May 29- June 8 during the session indicated above. My son/daughter will need to complete all of his/her summer school coursework by July 23. If s/he chooses not to finish by this date, s/he will be required to attend the 3rd week of summer school from July 30-August 3. I, the parent/guardian, also agree to attend a mandatory parent orientation during the time indicated above. I understand that if my son/daughter fails to complete the summer school course(s), fees are forfeited, an 'F' will be recorded on the official transcript and grade retention may occur.

Parent/guardian signature _____ Date _____

Student signature _____ Date _____

**Office use only: Date _____ Check # _____ Amount\$ _____ Initial _____