



# MIAMI-DADE COUNTY PUBLIC SCHOOLS

## REGISTRATION FORM: COMMUNITY EDUCATION CLASS

NAME OF COMMUNITY EDUCATION CLASS:

SCHOOL YEAR:

NAME OF SCHOOL:

LOCATION #:

NAME OF SCHOOL IF CLASS IS AT AN OFF-CAMPUS SITE:

STUDENT NAME:

LAST,

FIRST

STUDENT ISIS OR VACS NUMBER:

AGE:

GRADE:

REGISTRATION DATE:

HOME ADDRESS:

ADDRESS

CITY

STATE

ZIP CODE

HOME PHONE:

WORK PHONE:

CELL PHONE:

E-MAIL ADDRESS:

PARENT / LEGAL GUARDIAN'S NAME:

(IF STUDENT IS UNDER 18)

LAST,

FIRST

HOME ADDRESS:

ADDRESS

CITY

STATE

ZIP CODE

HOME PHONE:

WORK PHONE:

CELL PHONE:

E-MAIL ADDRESS:

## EMERGENCY CONTACT INFORMATION

ADDITIONAL EMERGENCY CONTACT NAME:

LAST,

FIRST

CONTACT'S RELATIONSHIP TO YOU:

HOME ADDRESS:

ADDRESS

CITY

STATE

ZIP CODE

HOME PHONE:

WORK PHONE:

CELL PHONE:

E-MAIL ADDRESS:

PERSON/S AUTHORIZED TO PICK UP CHILD IF ENROLLED STUDENT IS UNDER 18 YEARS OLD:

LAST,

FIRST

LAST,

FIRST

STUDENT IS UNDER 18 YEARS OLD BUT HAS PARENT/GUARDIAN PERMISSION TO WALK HOME:

YES

NO

OTHER DISMISSAL ARRANGEMENTS:

IN THE EVENT THAT NO PARENT OR GUARDIAN CAN BE CONTACTED, I GIVE PERMISSION FOR MY CHILD TO RECEIVE EMERGENCY MEDICAL TREATMENT. YES NO OR IF ENROLLED STUDENT IS 18 OR OLDER. YES NO

SPECIAL NEEDS / INSTRUCTIONS:

ADULT REGISTRANT OR PARENT/GUARDIAN SIGNATURE:

(IF STUDENT IS UNDER 18)

DATE:



# MIAMI-DADE COUNTY PUBLIC SCHOOLS

## REGISTRATION FORM: COMMUNITY EDUCATION PAYMENT RECORD

STUDENT NAME:

LAST,

FIRST

STUDENT ISIS OR VACS NUMBER:

NAME OF COMMUNITY SCHOOL CLASS	DAYS	START TIME	END TIME	NUMBER OF CLASS MEETINGS PER SESSION	CLASS FEE PER PERSON
--------------------------------	------	------------	----------	--------------------------------------	----------------------

M T W T H F S A S U

STARTING DATE	ENDING DATE	DATE OF FEE PAYMENT	AMOUNT OF FEE PAYMENT	RECEIPT NUMBER	TRANSACTION NOTES OR COMMENTS
---------------	-------------	---------------------	-----------------------	----------------	-------------------------------

REVIEW DATE:

REVIEWED BY:  
(PRINT NAME OF PRINCIPAL, APCE, OR DESIGNEE)

SIGNATURE: