

Schaefer "Explorations" Summer Enrichment Program Registration Form- SESSION A ONLY (June 24-July 5)

Student's Name	PRESENT Gr	PRESENT Grade & Teacher	
Name of Parent/Guar	dian		
Address:			
Home Phone:	Cell Phone:		
Business Phone:	E-Mail:		
late registration fee: made past June 3, 20	hild for the following courses for SESSION A. I also is should be included per family for applications postmarked 19, and refunds made prior to June 3 will result in a \$25 p st 1, 2019. Please register ONE child per registration for	after May 22. NO refunds will be rocessing fee. Refund checks will	
	Make checks payable to the Oradell Board of Ed	ucation.	
	Mail this registration form and full payment t Lesley Maklin, Assistant Director, Exploration Oradell Public School 350 Prospect Avenue Oradell, NJ 07649 Any questions, please call 201-261-1180 ext. 50 Each class this session is \$85	59.	
Period 1 (8:30-9:25)	First Choice	_	
	Second Choice	_	
	Third Choice	_	
Period 2 (9:30-10:25)	First Choice	_	
	Second Choice	_	
	Third Choice	_	
Period 3 (10:30-11:25) First Choice	_	
	Second Choice	_	
	Third Choice	_	
		Subtotal=	
Total payment encl	osed for courses and late registration fee (if applicable) for ON	= child	



PLEASE circle T-shirt size for your child: (youth sizes run small)

YOUTH: Small Medium Large XL