

Summer Programs Registration Contract 2012

PLEASE NOTE: Both Minnehaha and non-Minnehaha families are encouraged to register on the Redhawk On-Line Registration System. Access RORS at www.minnehahaacademy.net and place mouse over "Quick Links" and then select "Redhawk Online Registration System". All class registration is available on-line.

Student Name			Birth Date		Gender M F		
School Attending Fall 2012					Grade Fall 2012		
T-Shirt Size (Circle one, Pre-K through 8 only please)							
6-8	10-12	14-16	Adult S	Adult M	Adult L	Adult XL	Adult XXL

To register, write the name of your first class choice/camp in the corresponding slot on the chart below. For all day classes or camps such as Camp Minnehaha, write the name in BOTH morning and afternoon slots. If your first choice is already full when the Summer Programs office receives your registration, we will contact you to discuss alternative possibilities. Also indicate in the appropriate weekly slot your extended day needs. If you have any questions, feel free to call at 612/728-7745.

Week	Dates	Extended Day AM 7-8:30	AM Class/Camp Choice (8:30 AM until 12:00 PM)	PM Class/Camp Choice (12:30 PM until 4:00 PM)	Extended Day PM 4-6:00
1	6/11-15				
2	6/18-22				
3	6/25-29				
4	7/2-6 Holiday 7/4				
5	7/9-13				
6	7/16-20				
7	7/23-27				
8	7/30-8/3				
9	8/6-10				
10	8/13-17				

I have read and agree to all terms and policies of the Minnehaha Academy Summer Program as outlined on pages 30-31 in the catalog. I understand that I am responsible for full payment, whether or not my student attends, unless I notify Minnehaha Academy Summer Programs in writing prior to 12:00 pm on May 15, 2012. I understand that all class cancellations and/or changes made after my registration is processed are subject to the 2012 Summer Refund Policy. **Full payment is due by May 15, 2012.**

In registering for classes in the Minnehaha Academy Summer Programs, I understand that my child will be involved in a variety of activities, both at and away from the campuses of Minnehaha Academy, including playground and other physical activities, field trips, etc. By registering for the Minnehaha Academy Summer Programs, I hereby give permission for my child to participate in all related activities, both at and away from the Minnehaha Academy campuses. I further give Minnehaha Academy Summer Programs permission to provide appropriate, immediate medical attention in the event of any injury to my child.

Signature of Parent/Guardian	Date
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Upon receipt of (1) full payment, (2) completed emergency form and (3) signed registration form, your child will be enrolled in Minnehaha Academy Summer Programs.

Please make checks payable to MINNEHAHA ACADEMY SUMMER PROGRAMS and forward to 4200 W. River Parkway, Mpls., MN 55406.

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Contact and Medical Information

Student Name		Home Phone
Home Address		
City	State	Zip

Parent 1 Name		Home Phone
Parent 1 Address		
City	State	Zip
Cell Phone	Work Phone	Email

Parent 2 Name		Home Phone
Parent 2 Address		
City	State	Zip
Cell Phone	Work Phone	Email

Student Physician/Clinic		Phone
Physician/Clinic Address		
Insurance Company		
Policyholder		Policy Number

Emergency Contact Name	Daytime Phone	Cell Phone
Emergency Contact Name	Daytime Phone	Cell Phone

Additional Student Information

Describe any physical, social or medical needs of which we should be aware:
Please list any food or medication allergies:
Please list any current medications your student is taking:
When was your student's last tetanus shot:

Please help us market our program and tell us how you heard about Summer Programs (check all that apply)

<input type="checkbox"/> Returning Summer Programs Student	<input type="checkbox"/> Current MA Family
<input type="checkbox"/> Catalog Mailed to my Home	<input type="checkbox"/> Ad in Publication (Which?)
<input type="checkbox"/> Internet Search	<input type="checkbox"/> Word of Mouth (Who?)
<input type="checkbox"/> Other (What?)	

Referral Rebate

Any registered Summer Programs student can receive a \$50.00 rebate on their tuition for referring another family who registers and attends Summer Programs. If this applies to you, please list the name of your referral family (maximum of 2 families please, does not apply with other discounts).	
Referral 1	Referral 2