



Blue Oak After-School Classes Winter Trimester 2012 Registration Form

Student Name: _____ Parent Name: _____

School: _____ Grade: _____

Email Address: _____

Telephone Number: _____

Address: _____

Emergency Contact: _____

Class Title	Day of Week	Fee

Total # of Classes: _____

Total Cost: _____

Check Attached Total: _____

~Please fill out one form per student~