

Please fill out this registration form and return by January 18, 2019.

Students will ONLY be notified if a group will not be running or if there is overflow per group. Otherwise, all students will be accepted into their chosen programs.

Name		Male	Female
Address		Grade	
Home Phone	Cell Phone	ne Work Phone	
Program Choice (please c		7. 2	
O Morning Masn-Up	o (Monday – Friday) Grades F	X- 2	
O Breakfast Club/ST	TEM Challenges (Monday – Fr	riday) Grades 3-4	
O Band Together (Fr	riday only) Grade 4		
-	to attend the B.E.S.T. program 2019 from 7:15-8:15AM	before school from	:
Parent/Guardian Signatur	e		_
Please list any significan	t medical concerns:		