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** Continue on back for Fees & Emergency Contact Information**

Fees	
Classes for 2 Students Classes for 3 or more Students Note: If you make a 1 year commitment to volunteer as a teacher or the 2018-2019 school year you can receive ½ off your child(ren Contact Gaylene, Chris, or Gaby to inquire or volunteer at gaylene_m@qwestoffice.net racine_ca@qwestoffice.net ymstpaul@qwestoffice.net	\$50.00 \$70.00 \$ classroom aide for
Optional donation to Religious Education Scholarship Fund	\$
 □ I would like to make monthly payments to pay over time. □ I would like to apply for scholarship assistance. 	Total Due \$
Emergency Information In the event of an emergency, I hereby give permission to transport my classification for emergency medical or surgical treatment. I wish to be advised prior to treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the given recontact's Name	to any further numbers contact:
Parent Signature	• 17
Signature (Parent/Guardian) I do not give permission for my child(ren)s to be used in promotional materials. Name(s)	Date photographs
	mount: <u>\$</u> fon sent: