

# 2022 Summer School Registration Form - Please use a separate form for each child.

**(Complete and return to the district office before May 1, 2022)**

Name of Student: \_\_\_\_\_ Grade in 2022-23 School Year: \_\_\_\_\_

Register my child for the following classes/dates (check all that apply). Please note that **sessions are generally 8:30-1:00** unless otherwise noted. Please do not "double book" your child. Please note – this is an inquiry only; if enough students do not sign up for a class, it will be cancelled. Note: **Grades students are entering are in parentheses, if your child does not fit the grade category, please do not sign her/him up for that particular class.**

## **June 4-14**

- European Travel Trip (High School)

## **June 6-10**

- Art Camp (gr. 1-6) (**Capped at 20**)  
 Drama (gr. 4-12) (**Capped at 25**)

## **June 13-17**

- Engine/Automotive Learning (gr. 8-12) (**Capped at 9**)  
 Plein Air Painting (gr. 6-12) (**Capped at 15**)  
 Swimming Lessons (gr. 1-8) (**Capped at 30**)  
 Driver's Education

## **June 20-June 24**

- Open Swimming (gr. 1-8) (**Capped at 30**)  
 College Visits (gr. 10-12) (**Capped at 9**)  
 Introduction to Aviation (gr. 8-12) (**Capped at 9**)  
 Driver's Education

## **June 27-July 1**

- Open Swimming (gr. 1-8) (**Capped at 30**)  
 Basketball Skills Development (gr. 2-8)  
 Driver's Education

## **July 11-15**

- Oulu Heritage Week 1 (gr. 1-12) (**Capped at 30**)  
(at Oulu Heritage Museum)  
 Academic Skills Development (gr. 1-8)  
(at Oulu Heritage Museum)

## **July 25-29**

- Oulu Heritage Week 2 (gr. 1-12) (**Capped at 30**)  
(at Oulu Heritage Museum)  
 Volleyball (gr. 5-8) – 8:30-1pm transportation available  
 Volleyball (gr. 9-12) – evening 6-9pm  
 Football Mini Camp (gr. 8-12)  
 Academic Skills Development (gr. 1-8)  
(at Oulu Heritage Museum)

I give my child, \_\_\_\_\_ permission to attend the classes I checked on this sheet. This includes permission for all associated field trips, if applicable. I understand that lunch is **not** provided, so I need to pack a lunch for my child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date

## **Summer School Emergency Response and Release**

Student: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_ Family Physician \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

In case of accident or serious illness, I/we hereby request the school to contact a parent/guardian first, but also authorize school personnel to contact the above physician directly if neither parent/guardian can be reached. I/we further authorize school personnel to contact other medical response units in case the physician listed above is not immediately available. Health concerns/medications, if any, are listed: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date