



Summer School

2020 MIDDLE SCHOOL SUMMER SESSION REGISTRATION FORM



Student's Name _____ Grade Level in Fall 2020 _____

School Currently Attending _____

REGISTRATION FEE \$85 (\$125 after 5/1/2020) Non-Refundable	\$85 OR \$125	\$
ACADEMIC CLASSES (Check the Session(s) and circle the classes you want)		\$
<input type="checkbox"/> Session 1 only (8:45-10:15AM) Class: 6th Math OR 7th/8th English	\$575	
<input type="checkbox"/> Session 2 only (10:30AM-12:00PM) Class: 6th English OR 7th/8th Math	\$575	
<input type="checkbox"/> Both Sessions 1 & 2 (8:45AM-12:00PM) Session 1 Class: 6th Math OR 7th/8th English Session 2 Class: 6th English OR 7th/8th Math	\$1000	
<input type="checkbox"/> Study Hall Session 1 (8:45-10:15AM) OR Session 2 (10:30AM-12:00PM) *Students may enroll in only one study hall in conjunction with an academic class	\$110	
ENRICHMENT CLASSES (Choose the enrichment week(s) you want)		\$
Week 1 (6/17-6/19 - 3 days) <input type="checkbox"/> 12:30-3:30PM Board Game Strategies (3 hours)		\$120
Week 2 (6/22-6/26 - 5 days) <input type="checkbox"/> 12:30-2:00PM Sports (1.5 hours) 2:00-3:30PM Chinese Calligraphy (1.5 hours)		\$210
Week 3 (6/29-7/2 - 4 days, no school 7/3) <input type="checkbox"/> 12:30-3:30PM Cooking (1.5 hours) 2:00-3:30PM Geography & Cultures (1.5 hours)		\$180
Week 4 (7/6-7/10 - 5 days) <input type="checkbox"/> 12:30-3:30PM Sports Camp (3 hours)		\$200
Week 5 (7/13-7/17 - 4 days + 1 field trip day) <input type="checkbox"/> 12:30-3:30PM Marvegos Fine Arts (3 hours) <input type="checkbox"/> 12:30-3:30PM 3D Beading (3 hours)		\$300 \$175
TRANSPORTATION SERVICES <input type="checkbox"/> One Way \$50 <input type="checkbox"/> Two Way \$100		\$50 OR \$100
EXTENDED DAY CARE (3:30-6PM) (Full \$450 or daily drop-in rate \$25/day)		\$450
FIELD TRIP Last day field trip to Boomers (transportation + activities)		\$35
TOTAL		\$

Payment must accompany your registration packet. Please make checks out to Coastline Christian Schools and write your child's name and the words "Summer School" in the Memo line.

In consideration for participating in Summer School, I agree to indemnify and hold Coastline Christian Schools and all persons involved in this school harmless from any liability for any loss or injury that may be suffered by the above named individual arising out of or in any way connected with their participation in Summer School.

Parent's or Guardian's Signature _____

Print Name _____

Date _____

OFFICE ONLY

Date Rec'd _____ Amount Rec'd _____

☐ Cash

☐ Check # _____



Summer School

2020 MIDDLE SCHOOL SUMMER SESSION EMERGENCY INFORMATION AND PERMISSION FORM



STUDENT INFORMATION

Last Name:	First Name:	<input type="checkbox"/> M <input type="checkbox"/> F
Address:	City: Zip:	Home Phone: ()

PARENT OR GUARDIAN INFORMATION

Dad's Name:	Email:	Cell: ()
Mom's Name:	Email:	Cell: ()

EMERGENCY CONTACTS (If parent cannot be reached)

Name:	Relationship:	Phone: ()
Name:	Relationship:	Phone: ()

HEALTH INSURANCE INFORMATION

Insurance Company	Policy #	Medical Record #
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Doctor's Name:	Phone: ()
Address:	

Dentist's Name:	Phone: ()
Address:	

Special Instructions/Allergies/Conditions

I give permission for my child to receive Tylenol or Benadryl by the school if necessary. _____(Initial)

In case of emergency due to serious illness or accident and I cannot be contacted, I hereby authorize the school personnel to obligate me for the services of a doctor or medical care provider, and in extreme emergency, the services of an ambulance. I authorize, request, and direct any medical care provider contacted in such circumstances to render such treatment as in their professional judgment deemed advisable.

Parent's or Guardian's Signature

Print Name

Date



Summer School

2020 MIDDLE SCHOOL SUMMER SESSION TRANSPORTATION REQUEST FORM



Student's Name _____ Grade Level in Fall 2020 _____

MORNING SHUTTLE

DEPARTURE TIME & LOCATION	ARRIVAL TIME & LOCATION	COST
8:10 AM FoodNet 1960 Lewelling Blvd, San Leandro	8:30AM Alameda Campus 1801 North Loop Road, Alameda	\$50

MIDDAY SHUTTLE

DEPARTURE TIME & LOCATION	ARRIVAL TIME & LOCATION	COST
12:10PM Alameda Campus 1801 North Loop Road, Alameda	12:30PM FoodNet 1960 Lewelling Blvd, San Leandro	\$50

AFTERNOON SHUTTLE

DEPARTURE TIME & LOCATION	ARRIVAL TIME & LOCATION	COST
3:40PM Alameda Campus 1801 North Loop Road, Alameda	4:00PM FoodNet 1960 Lewelling Blvd, San Leandro	\$50

Please check the shuttle service(s) you need: ☐ Morning ☐ Midday ☐ Afternoon

Designated drop off/pickup locations:

- Alameda: CCS Bus loading area
- San Leandro: FoodNet Supermarket parking lot

NOTE: It is important to drop off your children promptly at the designated time and location. Students who miss the shuttle will need to arrange their own transportation. There is no refund for any unused shuttle service. They must be picked up within 15 minutes after the drop off in San Leandro. Otherwise, they may be transported back to Alameda to be placed in the After School program for an additional fee. Shuttle privileges may be removed for students who loiter and/or for disciplinary reasons.

Parent's or Guardian's Signature

Print Name

Date