

Canon-McMillan Summer School Program

Canon-McMillan High School

Registration Form 2018

Registration Form

Month Day Year

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Last Name (Skip a space) First Name (Skip a space) Middle Initial

Street Address

Apt. #

Town/City

State

Zip Code

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Area Code

Home Phone

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Area Code

Emergency or Alternate Phone

School District of Residence _____

Course Selection

Course #	Section #	Course Title	Cost

Student Signature: _____

Parent Signature: _____

***BOTH SIGNATURES REQUIRED FOR REGISTRATION**

Payment Enclosed (Print telephone # and the student's name on the Money Order)

MONEY ORDER ONLY
(Payable to Canon-McMillan School District)

MAIL TO:	Canon-McMillan High School Attention: SUMMER SCHOOL 314 Elm Street Extension Canonsburg, PA 15317
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