



# WINTER 2012 REGISTRATION FORM

PLEASE PRINT AND FILL OUT COMPLETELY. USE SEPARATE FORM FOR EACH PAYOR

Residency: Is your primary residence within the Ann Arbor Public School District? Yes  No   
Do you have a current Rec&Ed scholarship? Yes  No  Pending  ID# \_\_\_\_\_  
Change in address or phone for registrant since last registration? Yes  No   
Change in address or phone for payor since last registration? Yes  No

**Office Use**  
\_\_\_\_\_ of \_\_\_\_\_  
Batch # \_\_\_\_\_  
Trans # \_\_\_\_\_

## CLASS & CAMP SELECTIONS #1 PARTICIPANT INFORMATION Office Use

CLASS/CAMP ID#	CLASS/CAMP TITLE	FEE

FIRST NAME \_\_\_\_\_  
LAST NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
ST \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GENDER: M  F  GRADE \_\_\_\_\_  
SCHOOL CHILD WILL ATTEND IN FALL 12 \_\_\_\_\_

CK  CA  
 CC  CR  
# \_\_\_\_\_  
Total \$ \_\_\_\_\_  
Disc. \_\_\_\_\_

**REQUIRED INFORMATION: FOR YOUTH ENROLLING IN CLASS OR CAMP**

EMERGENCY CONTACT NAME \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
DOES YOUR CHILD HAVE ANY ALLERGIES OR MEDICAL CONDITIONS?  NO  YES (EXPLAIN) \_\_\_\_\_  
\_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

## CLASS & CAMP SELECTIONS #2 PARTICIPANT INFORMATION Office Use

CLASS/CAMP ID#	CLASS/CAMP TITLE	FEE

FIRST NAME \_\_\_\_\_  
LAST NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_  
ST \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GENDER: M  F  GRADE \_\_\_\_\_  
SCHOOL CHILD WILL ATTEND IN FALL 12 \_\_\_\_\_

CK  CA  
 CC  CR  
# \_\_\_\_\_  
Total \$ \_\_\_\_\_  
Disc. \_\_\_\_\_

**REQUIRED INFORMATION: FOR YOUTH ENROLLING IN CLASS OR CAMP**

EMERGENCY CONTACT NAME \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
DOES YOUR CHILD HAVE ANY ALLERGIES OR MEDICAL CONDITIONS?  NO  YES (EXPLAIN) \_\_\_\_\_  
\_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

### Payor Name (Person paying for classes(es) activities)

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
HOME PHONE (\_\_\_\_\_) \_\_\_\_\_ WORK PHONE (\_\_\_\_\_) \_\_\_\_\_  
EMAIL \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ GENDER: M  F

**PAYMENT METHOD:**  CHECK  CREDIT CARD  SCHOLARSHIP # \_\_\_\_\_  CREDIT ON Rec&Ed ACCOUNT

### Credit cards Please complete entire section

Name \_\_\_\_\_  
Print your name exactly as it appears on the credit card  
 VISA  Mastercard  AM EXPRESS Total Fee (Required) \$ \_\_\_\_\_  
Sorry we cannot accept debit cards at this time  
Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV# \_\_\_\_\_  
3-DIGIT SECURITY CODE  
SIGNATURE (REQUIRED) \_\_\_\_\_  
I agree to pay above total amount according to the card issuers agreement and the Rec&Ed Refund/Credit policy as listed in this catalog.

- 1 Make check payable to:** AAPS (ANN ARBOR PUBLIC SCHOOLS) Do not send cash.
- 2 Include payment:** Credit from Rec&Ed account: \$ \_\_\_\_\_  
 \$1 donation to the Rec&Ed Scholarship Fund  
Amount Paid: \$ \_\_\_\_\_
- 3 Mail entire form to:** Rec&Ed WINTER 2012  
1515 S. Seventh St.  
Ann Arbor, MI 48103