

Participant Last Name

Participant First Name



SOCIAL SKILLS CLASS RENEWAL SIGN UP

I have chosen the following weeks for 2024-2025

Saturday Group 9am-12pm (check all)

___ ***Session 1 Classes: 9/7, 9/14, 9/21, 9/28, 10/5, 10/12, 10/19***

___ ***Session 2 Classes: 11/2, 11/9, 11/16, 11/23, 12/7, 12/14 12/21***

___ ***Session 3 Classes: 1/11, 1/18, 1/25, 2/1, 2/8, 2/15, 2/22***

___ ***Session 4 Classes: 3/8, 3/15, 3/29, 4/5, 4/12, 4/19, 4/26***

All Sessions (set of classes) are \$600, no prorations.

****Registration fee for the 24-25 year = \$25***

****All fees need to be paid prior to the first class (Friday before) in order to join the session***

I have already completed an application for a prior session and filled out emergency contact and signed the participant waiver. _____ (initial here).

Parent Signature

Date

___ ***Total Sessions Chosen= \$_____ Money Owed***

___ ***Registration Fee paid _____***

Office Use Only:

Total Owed: _____

Not Approved _____

Paid Check/Cash _____ CK#: _____ Zelle: _____ Venmo: _____ Cash App: _____

Starting Date _____