



**Msgr. McClancy Memorial High School
Summer Session 2019**

**Registration
(For Non-McClancy Students)**

PLEASE FILL THIS FORM OUT ENTIRELY

Name of Student _____

Address _____ Apt # _____

City _____ State: _____ Zip Code _____

Home Phone _____ Student's Cell Phone _____

Name of Parent(s) or Guardian(s) _____

Parent's Cell Phone _____ Work Number _____

(The school must have phone numbers where a parent/guardian can be reached at all times)

Grade Attended in 2018-2019 School Year _____

Grade Attending in September 2019 _____

Courses: _____

_____ Registration Fee of \$25
(non-McClancy students only)

Amount Paid _____

_____ courses for _____

Amount Paid _____

Balance Due: _____

Paid in Full _____