PACE OF MIAMI SPRING SEMESTER REGISTRATION FORM

Mother's Name:_____ Spouse's Name:_____

Mother's Cell:_____ Spouse's Cell:_____

Mother's Work:_____ Spouse's Work:_____

Mother's occupation, skill, special knowledge:
_____
(e.g., doctor, bookkeeper, art, music, sewing, teacher)

Spouse's occupation, skill, special knowledge:
_____
(e.g., CPA, lawyer, music, handyman, plumber)

Home Address:_____ Home Phone:_____

City_____, **ZIP**_____

E-Mail: (very important)_____ Curriculum used: _____

Emergency Contact (other than above) 1:_____ Phone:_____ Relationship:_____

Emergency Contact (other than above) 2:_____ Phone:_____ Relationship:_____

REQUIRED ASSISTANT HOUR QUESTIONNAIRE

Note: You must assist 1 hour in a position assigned by the Schedule Coordinator. Your position may be re-assigned according to the needs of the Enrichment program. Babies, toddlers, and children not registered for class may not be in classrooms - they must go to childcare or be in someone else's care during your required assignment. Unless there is a special need & Board approves, parents will not be assigned to a class in which their child is registered. If you need to help your child in a particular class, which can only be done with the teacher's permission, indicate below. Your required assignment WILL NOT be in that class.

- Do you have a baby or toddler who will prevent you from doing a particular job because you do not wish to put him/her in childcare? _____. We cannot guarantee that your required position will be in childcare or any other position where you may have your child with you!
- My child has the following special needs:_____ and I must be with him/her. We cannot guarantee that your required position will be in a position where you may have your child with you!
- Do you have any allergies or medical condition that would prevent you from doing a specific job? _____ If so, please indicate that condition and your limitations_____
- Are you willing to help by working an additional volunteer position?_____At what hour?_____
- My teenage child (aged 13+) would like to serve as a junior volunteer to satisfy community service requirements for high school graduation- Name_____ Age _____Times Available_____
- Other information you feel we would need._____

_____

- **Parents acknowledge that it is their responsibility to notify a child's teacher of any special needs, allergies, or other health concerns of their child(ren). In the event of an emergency, I authorize a representative of PACE to seek medical attention for my child/children. I acknowledge responsibility for payment of any such emergency. At no time will I consider my children to be in the care, custody, or control of PACE**

I HAVE READ AND AGREE TO ABIDE BY THE P.A.C.E. POLICIES AS REVISED AND POSTED IN THE PACE WEBSITE AT WWW.PACEMIAMI.ORG

_____ _____

Signature Date

Existing Families doing Early Bird Registration:
Early Bird & Open Registration: **ON THE LEFT**, please indicate your child's **current COMPLETE schedule** and **ON THE RIGHT**, list **ONLY** the **classes you are pre-continuing in pen and classes that you would like to add in pencil.**

New Families:
Enter your child's name, grade, age, and DOB, and **ON THE RIGHT**, under "Spring Schedule," please indicate, in pencil, the classes for which you wish to register.

STUDENT NAME:_____ **GRADE:**_____**AGE:**_____**DOB:**___/___/___

CURRENT SCHEDULE:	**SPRING SCHEDULE:**
10:00	10:00
11:00	11:00
12:45	12:45
1:45	1:45
2:45	2:45

STUDENT NAME:_____ **GRADE:**_____**AGE:**_____**DOB:**___/___/___

CURRENT SCHEDULE:	**SPRING SCHEDULE:**
10:00	10:00
11:00	11:00
12:45	12:45
1:45	1:45
2:45	2:45

STUDENT NAME:_____ **GRADE:**_____**AGE:**_____**DOB:**___/___/___

CURRENT SCHEDULE:	**SPRING SCHEDULE:**
10:00	10:00
11:00	11:00
12:45	12:45
1:45	1:45
2:45	2:45

STUDENT NAME:_____ **GRADE:**_____**AGE:**_____**DOB:**___/___/___

CURRENT SCHEDULE:	**SPRING SCHEDULE:**
10:00	10:00
11:00	11:00
12:45	12:45
1:45	1:45
2:45	2:45

REGISTRATION FEES:

Early Bird Spring Registration: **-**Existing families $50 for Spring Registration
*Existing families registered in Enrichment classes may retain or drop classes on this day & Existing Support Group Families that plan on switching to Enrichment $50 for Spring Registration
Open Spring Registration: $70 for all Enrichment families & $70 for all Support families

******SPRING REGISTRATION CLOSES ON THE LAST DAY OF THE FALL SEMESTER AND RESUMES ON THE FIRST DAY OF SPRING SEMESTER******

FEES ARE NON-REFUNDABLE
ALL CLASS AND SUPPLY FEES ARE DUE ON UPON REGISTRATION.