SMART: REGISTRATION PAGE

		-	registration.	
Student Name:			Date:	
	School:			
Home Address:				
Street No.	City		Zi	•
	Work Phone:			
Parents' Names:	E-Mail			
	SM <u>ART</u> : List three classes and alternat	es from the SMART sche	dule	
	ession I		Session II	
1st Choice	2nd Choice	1st Choice		2nd Choice
Column A				
Column B				
Column C				
SMART Fees: First Session: \$349 1s Second Session: \$349 1s		TOTAL PAYMENT \$_		
Phone/Fa	FOWN CONTINUING EDUCATION, 1 ax: (203) 426-1787	2 Berkshire Road, Sand	y Hook, CT 0648	2
Payment Type: (circle one) Check MC Visa Discover An	mex Charge #:			
	nis form may be duplicated. Use a so	•		
Student Name:			Date:	
Student Name: Exiting Grade May 2019:	School:	· 	Date:	
Student Name:Exiting Grade May 2019:Home Address:Street No.	School:		Date: Teacher:	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone:	School:City Work Phone:		Date: Teacher:	
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone:	School: City Work Phone:		Date: Teacher: Zi Cell Phone: _	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone:	School:City Work Phone:		Date: Teacher: Zi Cell Phone: _	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names:	School: City Work Phone: E-Mail	es from the SM <u>ART</u> sche	Date: Teacher: Zi Cell Phone: _	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names:	School: City Work Phone: E-Mail SM_ART: List three classes and alternat		Date: Teacher: Zi Cell Phone: _	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names:	School: City Work Phone: E-Mail SM_ART: List three classes and alternate ession I 2nd Choice	es from the SM <u>ART</u> sche	Date: Teacher: Zi Cell Phone: _	p
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Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names: Ist Choice Column A	School: City Work Phone: E-Mail SM_ART: List three classes and alternate ession I 2nd Choice	es from the SM <u>ART</u> sche	Date: Teacher: Zi Cell Phone: dule Session II	p
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names: 1st Choice Column A Column B	School: City Work Phone: E-Mail SM_ART: List three classes and alternate ession I 2nd Choice t child/\$329 2nd child	es from the SM <u>ART</u> sche	Date: Teacher: Zi Cell Phone: dule Session II	2nd Choice
Student Name: Exiting Grade May 2019: Home Address: Street No. Home Phone: Parents' Names: Ist Choice Column A Column B Column C SMART Fees: First Session: \$349 1s Second Session: \$349 1s	School: City Work Phone: E-Mail SM_ART: List three classes and alternate ession I 2nd Choice t child/\$329 2nd child	es from the SM <u>ART</u> sche 1st Choice TOTAL PAYMENT \$_	Date: Teacher: Zi Cell Phone: dule Session II	2nd Choice