

**Leap into Learning
 DEMONSTRATION SUMMER SCHOOL
 FOR GIFTED AND ADVANCED STUDENTS**

July 17-21, 2017

La Cumbre Junior High
 2255 Modoc Rd. Santa Barbara, CA 93101

Student Name		Female	Male
Birthdate	School	CURRENT grade level (2016-2017)	
Parent/Guardian(s) Name(s)			
Home Address (Number and Street), City and Zip			
E-mail Address			
Home Phone	Work Phone	Cell Phone	

In an emergency when parent cannot be reached at home or work, please call:	
(Name)	(Phone)

If there is a special medical need, describe here:
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I do ___ do not___ authorize the school to choose a doctor in the event of an emergency.	
Our doctor is:	Doctor Phone

Parent/Guardian Signature
By signing this line, I give permission for my student to be filmed or video taped for teacher training materials and/or publications.

You may pay the \$150 tuition by check or credit card.
 Mail the application with payment information or check to:
 Jennette Harper PO Box 696 Yucaipa, CA 92399

Please make check payable to CAG or put credit card information below:

Payment Method:

Check # _____

Credit Card: VISA MASTERCARD AMEX

Card #: _____ Exp. Date: _____

Signature: _____ Sec. Code: _____