

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

**June 26-30, 2017**

Phoebe Hearst Elementary  
 1410 60<sup>th</sup> Street Sacramento, CA 95819

Student Name		Female	Male
Birthdate	School	<b>CURRENT</b> 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:	
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: