

Important Information about Registering Your Children for Classes

When should I register?

Registration is first come, first served. Register early to avoid disappointment.

What age must my child be to participate?

Grade level is listed on the class schedule. This is the grade your child will be entering in September, 2015. Preschool Students must be 4 years old as of December, 2014 and must be registered for the school year beginning in September, 2015.

Where are the classes located?

Bixby Elementary, 16446 Wedgeworth Drive in Hacienda Heights (Across the street from Wilson High School).

What about lunch time supervision?

Your child's safety and comfort are extremely important to us. Any child who is enrolled in both a 10:15 AM class and a 12:30 PM class the same week will be supervised during the lunch time. Students must bring their own lunch. Activities will be provided when the students have finished eating. There is no additional charge for this supervision.

How do I register?

- 1 Use a separate class application, or photocopy for each student.
- 2 Fill out all requested information at the top of the application.
- 3 Fill out all requested information for the classes you want.
- 4 Unless you have previously purchased a life membership, your membership expires on May 1. If you are joining or rejoining YSC now, write the membership fee. Add this to TOTAL FEE.
- 5 Write the TOTAL AMOUNT ENCLOSED.
- 6 In case some classes you choose are full, fill out all requested information for alternate class choices
- 7 Print your name on the line provided.
- 8 Sign the application.
- 9 We cannot accept reservations without payment.
- 10 A class confirmation will be sent to you via e-mail. We regret that we are not able to confirm classes by telephone. Please allow 2-4 weeks for the class confirmation to be sent to you via e-mail.
- 11 For more information, please e-mail us at ysc@youthsciencecenter.org or call (626)854-9825 or (626)588-7818.
- 12 We will post a list of classes closed due to full enrollment on our web site, www.youthsciencecenter.org

CLASS APPLICATION (Please print clearly and fill out entire form)

YSC Member? (Y/N/Joining Today)

Student's Name: _____
Last First Middle

Mailing Address: _____
Street City Zip

Parent's Name: _____ Email Address: _____

Would you like to receive our newsletter and other YSC communications by email? (Y / N)

Home Phone: _____ Work/Cell Phone: _____

Employer's Name: _____ Address: _____

Emergency Contact: _____
Name Number

Grade Level in September 2015: _____

School: _____
Name City District

Disability/Illness/Medication? (Y / N) If yes, please describe: _____

How did you hear about our Summer Program? _____

Have you taken Youth Science summer classes previously? (Y / N)

Class #	Class Title	Date	Time	Fee	Class # of alternate choice

*** Please use another sheet of paper if you wish to enroll in more classes ***

I would like to become an annual YSC Member: (Circle One) Family \$50 | Sustaining \$75 | Business \$100 | Life \$250

Enclosed is my optional tax-deductible contribution for membership

\$ _____ + Fees \$ _____ = Total \$ _____

If paying by check please write check number here: #

Circle the weeks that you need lunchtime supervision. Week 1 | Week 2 | Week 3 | Week 4 | Week 5

PARENT SIGNATURE REQUIRED:

I have read the registration policies and certify that the information I provided is correct.
 I understand I must pick up my child immediately after his/her class has ended.
 I hereby give consent to YSC to photograph my child. I understand pictures may be included in program scrapbooks and/or in the promotion of YSC programs in newspapers, slideshows, or other media.
 I authorize any licensed physicians, nurses, or hospital to render such medical aid as may be deemed necessary and/or desirable.

PRINT Name of parent or guardian: _____

SIGNATURE of parent or guardian: _____ Date: _____

OFFICE USE

Mail application form to Youth Science Center P.O. Box 5723 Hacienda Hts, CA 91745 or to 16446 Wedgeworth Drive Hacienda Heights, CA 91745
 In order to provide the highest quality instruction at a reasonable cost, we use volunteer-help assisting in the classroom, museum, and playground. If you would like to help, please fill out the form below:

Your Name: _____ Child's Full Name: _____

Your E-mail Address: _____ Phone Number: _____

Your Mailing Address: _____

Please circle the weeks you can help: Week 1 | Week 2 | Week 3 | Week 4 | Week 5

I prefer to help in (circle your choice) the classroom | the museum | the playground