

Summer Skills For a Better Year!

Enrollment in our Summer Skills program will provide individualized instruction to enhance current abilities and introduce more effective approaches towards learning.

Student's Name: _____
Birthday: _____
School: _____ Grade: _____

Parent's Name: _____ Parent's Name: _____
Parent's Cellular: _____ Parent's Cellular: _____
Home Phone: _____ Home Phone: _____
Parent's Email: _____ Parent's Email: _____
Home Address: _____ Home Address: _____

Emergency Contact Information: _____

Medications & Dosages: _____

Does your child have allergic reactions to anything specific? If so please list.

Doctor's Names: _____
Pediatrician: _____ Phone Number: _____
Neurologist: _____ Phone Number: _____
Psychologist: _____ Phone Number: _____
Testing Date: _____ Evaluator: _____ Copy: _____

Please select the preferred time frame for your child's appointment time:

Drop- off	Pick-up
<input type="checkbox"/> 9:45AM – 10:30AM	10:45AM – 10:30AM
<input type="checkbox"/> 10:45AM – 11:30AM	11:45AM – 12:30PM
<input type="checkbox"/> 11:45AM – 12:30PM	12:45PM- 1:30PM
<input type="checkbox"/> 12:45PM- 1:30PM	1:45PM – 2:30PM
<input type="checkbox"/> 1:45PM	2:45PM

Please Select Tutor Preference:

- 1-on-1 Session, 1 hour of instruction (\$80/session)
- 1-on-1 Session with Lucy , 1 hour of instruction (\$90/session)

Please select the days your child will be attending (Next Page)

Located in the Bet Shira Congregation 7500 SW 120 Street, Miami, FL 33156

Please select the days your child will be attending:

2020 JUNE						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Printable Calendar From Wishshi.com

2020 JULY						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

2020 AUGUST						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15

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