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## STUDENTS MAY ENROLL ANY TIME

### PRE-REGISTRATION - PLEASE CHECK ALL THAT APPLY

- Fall 2010** Sept 8<sup>th</sup> – Jan 28<sup>th</sup>       New Student    Continuing Student    Returning Student
- Spring 2011** Jan 31<sup>st</sup> – June 3<sup>rd</sup>       Full-time    Part-time (enrolled at other high school during school year)
- Summer 2011** June 20<sup>th</sup> – Aug 26<sup>th</sup>

**PLEASE RETURN THIS FORM if you plan to attend Halstrom High School in the coming school year. Without a Pre-Registration form, we cannot guarantee space availability.**

Students may complete pre-registration for the 2010 - 2011 school year. The only financial obligation for pre-registration is the \$150 **non-refundable** registration fee. Your commitment gives us an opportunity to plan instructor contracts and order instructional materials.

**Schedule priority will be given in the order pre-registration forms and fees are received.**

**Student Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Birthdate** \_\_\_\_/\_\_\_\_/\_\_\_\_  
**Present Grade Level** \_\_\_\_\_ **Current High School** \_\_\_\_\_  
**Parent's/Guardian's Name(s)** \_\_\_\_\_

**Billing Address** \_\_\_\_\_  
 \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Home Number Work Number (circle Mother's Father's)

**TUITION AND FEES FOR 2010-2011:**

- \$150 Registration Same for 1 or 2 semesters (**non-refundable**)
- \$250 Enrollment Full-time only (**non-refundable**)
- \$865\* per course One semester 5-unit course

\* *Tuition does not include textbooks. There is a \$35 material fee for each textbook.*

**SCHOOL USE ONLY**

Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Course Verification Rec'd \_\_\_\_  
 Amount Paid \$ \_\_\_\_\_  
 Initials \_\_\_\_\_

**TUITION QUESTIONS:** Students' programs and tuition vary since each student's program is personalized. Please call your director if you have questions regarding tuition and fees.

**Enrollment Appointment – Please call us to set an appointment to develop your course plan.**

**Part-Time students ONLY - Please indicate the title(s) of course(s) you would like to attend:**

Course 1 \_\_\_\_\_ A B  
 Course 2 \_\_\_\_\_ A B

**Full-Time students ONLY:** We will try to work with other scheduling priorities

**Mon.** am pm      **Wed.** am pm      **Fri.** am pm  
**Tues.** am pm      **Thu.** am pm

Work Schedule \_\_\_\_\_  
 Sports Schedule \_\_\_\_\_

**REGISTRATION PAYMENT:**  Check \$ \_\_\_\_\_ # \_\_\_\_\_

Master       Visa       Discover

Credit Card No: [ ][ ][ ][ ] - [ ][ ][ ][ ] - [ ][ ][ ][ ] - [ ][ ][ ][ ] Exp. Date \_\_\_\_/\_\_\_\_

Name on Credit Card: \_\_\_\_\_

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Date