

**Grace Christian Schools Enrichment Class Registration Form
Classes at Serra Mesa Christian Fellowship--2649 Murray Ridge Road.**

Parent's Name _____ Home Phone _____

Address _____

Email _____ Cell Phone _____

1st Student(s) Name	Grade	Class Title/Grade Level	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2nd Student(s) Name	Grade	Class Title/Grade Level	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3rd Student(s) Name	Grade	Class Title/Grade Level	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand that large class registration may require a parent aide; I agree to volunteer as an aide at least once during the 9 week session. Parent signature: _____

**Print and return this registration form to reserve a space in the class for the Fall session to Grace Christian Schools, 3656 Ruffin Road, #B, San Diego, CA 92123
Fall session runs September 16-November 18 (No class on Veteran's Day)**

**All class fees must be paid before classes start on September 16, 2010.
Make check payable to Grace Christian School (Payment by credit card accepted)**

If a class is cancelled class fees will be totally refunded.
Sorry, NO refunds for missed classes.

-----Office

**Class Fees paid. Check # _____ or CC
_____ Waiver Signed _____ Student Agreement Signed**