



2021 SUMMER COLLEGE APPLICATION WORKSHOP

July 12th, July 19th, July 26th & August 2nd

REGISTRATION FORM

Student's Full Name: _____ Date of Birth: _____

Parent's Name: _____

Address: _____ City/Zip Code _____

Student's Phone Number: _____

Parent's Phone Number (s): _____

Student's Email Address: _____

Parent's Email Address: _____

Student's Current High School: _____

Please indicate the desired Application Session:

_____ **SESSION #1** – 9 to 11:30 a.m.

_____ **SESSION #2**—1 to 3:30 p.m.

Please initial the following:

_____ I agree to make the full payment of \$2250 to secure a place in the Application Workshop session indicated above. ** Three payment options:

1. Checks should be made out to: *Apps4College* and brought to the first class.
2. Venmo payments should be made to: @Linda-Schroeder-18
3. Or a bill can be sent to you and paid via PayPal prior to the first class.