

**SummerGATE 2021 Session II at Holy Name School**

**July 6 - July 23, 2021**

**Monday-Friday 9:00 - 4:30 \$1650** *(Before and Aftercare available)*

**Student** Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Street \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Current School \_\_\_\_\_ Grade \_\_\_\_\_

Date of Birth \_\_\_\_\_ Child's T-shirt Size \_\_\_\_\_

Gender Preference:  Girl  Boy Sibling Enrolled?  Yes  No

**\*Payment Information (check all that apply):**

- I have attached a check for Session II: \$1640 per child (\$10 check discount).
- My child qualifies for the Merit Scholarship of \$25.00 (report card attached).
- I am signing up for Before Care at \$100.00 per child, per session.
- I am signing up for After Care at \$200.00 per child, per session.
- I authorize you to charge my Credit Card for the tuition amount.
- Please send me an official receipt (for employee pre-tax plan or IRS).

**Credit Card Information: (Circle One) Visa Discover Mastercard**

**Expiration:**

**ID #:**

**Office Use Only:** Date \_\_\_ rec \_\_\_ ✓ ✓ \_\_\_ bill \_\_\_ cred \_\_\_ log \_\_\_ SGDB \_\_\_  
Conf \_\_\_ MDB \_\_\_ cert \_\_\_ BDC

**Parent Information (please print):**

**Parent Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Grade/Course Selection**

- 1-2** Magic Schoolbus Rides Again **(am)** Feral Critter in My Backyard **(pm)**
- 2-3** The World According to Humphrey **(am)** Anything Goes! **(pm)**
- ~~**\*3-4** Lords, Ladies, Castles and Dragons **(am)**~~  
~~Mad Scientist Lab **(pm)**~~
- 4-5** Summer Sleuths! *Science, Math, Literature (am), Art, Music and Yoga (pm)*
- 5-6** Summer Quest *Humanities, Math, Technology (am)*  
*Book Club, Science and PE (pm)*
- 6-7** Summer Pursuit! *Humanities, Science, Math, Technology, Cooking, and PE*
- 7-8** Summer Success! *Humanities, Math, Technology (am)*  
*Language, Cooking and PE (pm)*  
*\*waitlist only, please contact the office!*

**Total number of children enrolled:** \_\_\_\_\_

**Childcare:** \_\_\_\_\_

**Total:** \_\_\_\_\_

**Office Use Only:**

Return all forms with payment to GATE to 1456 9th Ave San Francisco CA 94122  
or to our onsite location of 321 Taraval Street @ Funston.  
Make checks payable to GATE. Call 415-828-3374 with questions.