SummerGATE 2023 Session III at St. Gabriel School

July 24 - August 4 Mon-Fri 9:00 - 4:30 \$1255 (Extended Care Available)

Student Information

Last Name _____ First Name _____

Street_____ Apt. # _____

City _____ Zip _____

Current School _____ Grade as of Fall '23 _____

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 full-day check for Session III: \$1255 per child (\$10 check discount)

____ My child qualifies for the Merit Scholarship of \$25.00 (report card attached).

____ I am signing up for Extended Care at \$250 per child.

____ I will pay via PayPal using the QR Code below or via paypal.me/GATESFYC

____ Please send me an official receipt for employee pre-tax plan or IRS.



| *Refunds minus a processing fee of \$100.00 can be granted up until May 1st, | 2023. |
|--|-------|
|--|-------|

| Signature | :: |
|------------------|---|
| Parent Nar | me: |
| Email: | |
| Home Pho | ne: Cell: |
| <u>Course Se</u> | lections |
| TIME | Full days preferred. Inquire about half days. |
| 9-10:10 | |
| 10:10-11:20 | |
| 11:20-12:30 | |
| LUNCH | |
| 1:00-2:10 | |
| | |
| 2:10-3:20 | |

Total number of children enrolled: ______ Childcare: ______ Total tuition cost: ______ Office Use Only:

Return all forms with payment to GATE 321 Taraval Street SF 94116 Make checks payable to GATE. Call 415-629-8540 or email infosummergate@gmail.com with questions.

Second Choice Class Selections

| TIME | |
|---------------------|--|
| 9- 10:10 | |
| 10:10-11:20 | |
| 11:20-12:30 | |
| LUNCH | |
| 1:00-2:10 | |
| 2:10-3:20 | |
| 3:20-4:30 | |

If possible, please place my child in classes with these friends:

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