

2018 MathEdge Summer Registration

Student Name: _____ Entering Grade: _____ School: _____
 Home Phone: _____ Address: _____
 Mother Name: _____ Work Phone: _____ Cell: _____
 Email(s): _____ (must provide)
 Father Name: _____ Work Phone: _____ Cell: _____

AM (9-12noon, M-F, GK-8): Math Contest Prep (pls circle)

AMC 8 | MathCounts | Math Olympiads | MathKangaroo | MathLeague | Speed Math

PM (1- 4pm, M - F, GK - 8): School Math (pls circle)

Common Core GK-6 | CC2 | CC3 | Algebra 1 | Geometry | Algebra 2 | PreCal | Speed Math

Please circle the week(s) and camp(s) signing up for **Fremont Site**:

Week (M-F) (Please circle)	Camp (Circle AM, PM, or both)	Week (M-F) (Please circle)	Camp (Circle AM, PM, or both)
1) 6/18/18 – 6/22/18	AM _____ PM _____	5) 7/23/18 – 7/27/18	AM _____ PM _____
2) 6/25/18 – 6/29/18	AM _____ PM _____	6) 7/30/18 – 8/3/18	AM _____ PM _____
3) 7/9/18 – 7/13/18	AM _____ PM _____	7) 8/6/18 – 8/10/18	AM _____ PM _____
4) 7/16/18– 7/20/18	AM _____ PM _____	8) 8/13/18– 8/17/18	AM _____ PM _____

Note: Lunchtime care is included for students signing daylong camps but bring own lunch. Before/after camps childcare is available upon request.

Snacks are provided every day with each camp.

Fee for Half-day (AM or PM) camps:

4 weeks (\$1050) ____ | 3 weeks (\$800) ____ | 2 weeks (\$550) ____ | 1 week (\$299) ____ | one half day (\$65) ____

Fee for Whole-day (AM and PM) camps:

4 weeks (\$2050) ____ | 3 weeks (\$1550) ____ | 2 weeks (\$1050) ____ | 1 week (\$550) ____ | one whole day (\$120) ____

____ **4-6 pm** after camp child-care: **\$100/wk or \$15/hr** (With advanced payment. Without it, late pickup charge at \$1/min)

Qualified for early bird ____ **10% off by 3/15/18;** | ____ **5% off by 4/15/18.**

Final amount is: \$ _____ **Check #** _____ Payable to **MathEdge**

Please complete, mail form and check to to **MathEdge** at “43385 Ellsworth St. Fremont CA 94539”.

Note: No refunds will be granted. For all other conditions, 25% handling fee will be charged. We reserve the right to change/cancel a class. I give my permission for my child to participate in the MathEdge program. I will not hold MathEdge liable of any accidents, physical or other injury from any and all claims, demands, costs, expenses, and compensation. By signing this form, I agree to these terms freely and voluntarily without inducement for myself and on behalf of my child

Parent/Guardian Signature: _____ **Date:** _____



Creating Sharp Minds For Sharp Solutions

Fremont Site: **43385 Ellsworth St. Fremont CA 94539**

(510) 573-4780, www.mathedge.org, MathEdge.fremont@gmail.com