



**LEARN TO FLY!**  
**Sky School 2006**  
**June 26th-30th**

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# Registration Sheet

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**\*PLEASE INDICATE WHICH WEEK YOU WOULD LIKE TO ATTEND:**

WEEK 1 (JUNE 26<sup>TH</sup> -30<sup>TH</sup>) \_\_\_\_\_

WEEK 2 (JULY 17<sup>TH</sup>-21<sup>ST</sup>) \_\_\_\_\_

**Student Information:**

FULL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE#: \_\_\_\_\_

**Parent Information:**

PARENT NAME(S) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE # \_\_\_\_\_

EMERGENCY CONTACT PHONE #: \_\_\_\_\_

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\*A \$350 NON-REFUNDABLE DEPOSIT IS NEEDED TO RESERVE YOUR PLACE IN THE PROGRAM. THE REMAINING \$400 WILL NEED TO BE PAID BEFORE THE FIRST DAY.