

Please complete both sides of this registration form, detach and mail with your check to enroll your child in the program.

Name: _____
Street Address: _____
City and Zip Code: _____
School Attending: _____

Telephone: _____
Grade to be completed: _____
(as of July 2008)

Please make checks payable to:
M.C.V.S.D.

I would prefer that you bill my charge account:

Visa / MasterCard: _____
Expiration Date: _____

Digital Electronics: Session I
July 14 - July 18

Digital Electronics: Session II
July 21 - July 25

Student Signature: _____
Parent Signature: _____

Building Digital Circuits

a five day, summer enrichment program for students entering grades 6, 7, & 8

High Technology High School

P.O. Box 119
Lincroft, New Jersey 07738

the information you requested re: the 2008 Summer Technology program for 6th, 7th, & 8th grade students

