

# P.A.C.E. OF MIAMI SPRING SEMESTER REGISTRATION FORM

Mother's Name: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mother's Cell: \_\_\_\_\_ Spouse's Cell: \_\_\_\_\_

Mother's Work: \_\_\_\_\_ Spouse's Work: \_\_\_\_\_

Mother's occupation, skill, special knowledge: \_\_\_\_\_ Spouse's occupation, skill, special knowledge: \_\_\_\_\_

\_\_\_\_\_  
(e.g., doctor, bookkeeper, art, music, sewing, teacher)

\_\_\_\_\_  
(e.g., CPA, lawyer, music, handyman, plumber)

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City \_\_\_\_\_, ZIP \_\_\_\_\_

E-Mail: (very important) \_\_\_\_\_ Curriculum used: \_\_\_\_\_

Emergency Contact (other than above) 1: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact (other than above) 2: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## **REQUIRED ASSISTANT HOUR QUESTIONNAIRE**

**Note: You must assist 1 hour in a position assigned by the Schedule Coordinator. Your position may be re-assigned according to the needs of the Enrichment program. Babies, toddlers, and children not registered for class may not be in classrooms - they must go to childcare or be in someone else's care during your required assignment. Unless there is a special need & Board approves, parents will not be assigned to a class in which their child is registered. If you need to help your child in a particular class, which can only be done with the teacher's permission, indicate below. Your required assignment WILL NOT be in that class.**

- Do you have a baby or toddler who will prevent you from doing a particular job because you do not wish to put him/her in childcare? \_\_\_\_\_. We cannot guarantee that your required position will be in childcare or any other position where you may have your child with you!
- My child has the following special needs: \_\_\_\_\_ and I must be with him/her. We cannot guarantee that your required position will be in a position where you may have your child with you!
- Do you have any allergies or medical condition that would prevent you from doing a specific job? \_\_\_\_\_ If so, please indicate that condition and your limitations \_\_\_\_\_
- Are you willing to help by working an additional volunteer position? \_\_\_\_\_ At what hour? \_\_\_\_\_
- My teenage child (aged 13+) would like to serve as a junior volunteer to satisfy community service requirements for high school graduation- Name \_\_\_\_\_ Age \_\_\_\_\_ Times Available \_\_\_\_\_
- Other information you feel we would need. \_\_\_\_\_

- **Parents acknowledge that it is their responsibility to notify a child's teacher of any special needs, allergies, or other health concerns of their child(ren). In the event of an emergency, I authorize a representative of P.A.C.E. to seek medical attention for my child/children. I acknowledge responsibility for payment of any such emergency. At no time will I consider my children to be in the care, custody, or control of P.A.C.E.**

**I HAVE READ AND AGREE TO ABIDE BY THE P.A.C.E. POLICIES AS REVISED AND POSTED IN THE P.A.C.E. WEBSITE AT [WWW.PACEMIAML.ORG](http://WWW.PACEMIAML.ORG)**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Existing Families doing Early Bird Registration:**

Early Bird & Open Registration: **ON THE LEFT**, please indicate your child’s **current COMPLETE** schedule and **ON THE RIGHT**, list **ONLY** the classes you are pre-continuing in pen and classes that you would like to add in pencil.

**New Families:**

Enter your child’s name, grade, age, and DOB, and **ON THE RIGHT**, under “Spring Schedule,” please indicate, in pencil, the classes for which you wish to register.

STUDENT NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CURRENT SCHEDULE:**

**SPRING SCHEDULE:**

\_\_\_\_\_  
10:00  
\_\_\_\_\_  
11:00  
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12:45  
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11:00  
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12:45  
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1:45  
\_\_\_\_\_  
2:45

STUDENT NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CURRENT SCHEDULE:**

**SPRING SCHEDULE:**

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2:45

STUDENT NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CURRENT SCHEDULE:**

**SPRING SCHEDULE:**

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STUDENT NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**CURRENT SCHEDULE:**

**SPRING SCHEDULE:**

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2:45

**REGISTRATION FEES:**

**Early Bird Spring Registration:** -Existing families \$45 for Spring Registration

\*Existing families registered in Enrichment classes may retain or drop classes on this day & Existing Support Group Families that plan on switching to Enrichment \$45 for Spring Registration

**Open Spring Registration:** \$65 for all Enrichment families & \$65 for all Support families

**\*\*\*\*SPRING REGISTRATION CLOSES ON THE LAST DAY OF THE FALL SEMESTER AND RESUMES ON THE FIRST DAY OF SPRING SEMESTER\*\*\*\***

**FEES ARE NON-REFUNDABLE**

**ALL CLASS AND SUPPLY FEES ARE DUE ON UPON REGISTRATION.**