

ST GEORGE GREEK SCHOOL

REGISTRATION 07-08

(please fill out one form for each student/participant)

MISSION STATEMENT: To promote Greek culture through the education of Greek language, cuisine, dance, history, geography, and art together with the celebration of national holidays.

NAME_____

Parents' Name (for student applications)_____

GREEK/BAPTISMAL NAME_____

CONTACT NUMBERS_____

EMAIL ADDRESS_____

ADDRESS_____

AGE_____

BIRTHDATE_____

LEVEL: ____Beginner ____Intermediate ____Advanced

St George Greek School is a volunteer association supported by its Church. Fees are kept to a minimum in order to encourage maximum participation for all. To this end all enrollees are expected to volunteer a MINIMUM of 6 (six) hours throughout the year at events sponsored by the Greek School. When this is not feasible, the fee of \$60 is charged per participant. Additionally, all enrollees will be charged a one time material fee of \$8/individual \$25/family as well as the cost of the text selected by the teacher.

I AGREE TO VOLUNTEER A MINIMUM OF 6 HOURS DURING THE YEAR_____ (PLEASE INITIAL) OR I PREFER TO PAY THE \$60 PARTICIPATION FEE_____ (PLEASE INITIAL)