

## SEMI-PRIVATE REGISTRATION

To Register for SEMI-PRIVATE ONLY, AFTER speaking with Dr. Gagnon at (410) 442-1600. (For School-based courses, please complete that registration form in the REGISTRATION section. Please do not use this Semi-private registration form for School-based Courses.)

1. Please fill out the form
2. Enclose a long, self-addressed (to the parent), stamped envelope
3. Indicate first, second, and third choices for semi-private classes  
Every attempt will be made to accommodate your first choice, however, if that class is full or if it has insufficient enrollment, Dr. Gagnon will call you to possibly re-schedule.
4. Mail to: 2660 Daisy Rd. Woodbine, MD 21797

Please print:

Name of Student: \_\_\_\_\_

Parent's E-mail Address: \_\_\_\_\_

Phone Numbers:

Day (     ) \_\_\_\_\_

Evening (     ) \_\_\_\_\_

Parent's Cell (     ) \_\_\_\_\_

Please indicate student's year of high school graduation: \_\_\_\_\_

School: \_\_\_\_\_

BEST previous scores from PSAT or SAT:

Critical Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Writing: \_\_\_\_\_

Please indicate the student's first, second, and third choices for the Early Fall Course Sections:

First choice Section: \_\_\_\_\_

Second choice Section: \_\_\_\_\_

Third choice Section: \_\_\_\_\_

Enclose a check for your deposit: \_\_\_\_\_ Check #