

Herron High School
Summer School
110 E. 16th Street
Indianapolis, IN 46202
(317) 231-0010



2009 SUMMER SCHOOL REGISTRATION FORM

8:00 a.m. to 2:00 p.m.

Session 1 June 9th - June 26th

Session 2: July 21st - August 7th

TODAY'S DATE: _____

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(# & Street) (Apt #) (City) (Zip Code)

Parent/Guardian(s) First & Last Names: _____

Parent/Guardian(s) Home Phone: _____ Work Phone: _____

Parent/Guardian(s) E-mail address: _____

Emergency Contact: _____ Phone: _____

COURSE(S) IN WHICH YOU ARE ENROLLING

(Please circle appropriate course and semester/session)

Lang. Arts Lab:	1 or 2	*English 9:	1 or 2	*English 10:	1 or 2
*English 11:	1 or 2	Pre-Algebra:	1 or 2	Algebra I:	1 or 2
Geometry:	1 or 2	*Algebra II:	1 or 2	Health:	1 or 2
*Latin Remediation:	1 or 2	Physical Education:	1 or 2	Mixed Media:	1 or 2

**courses designated by one asterisk can only be taken by students who have previously taken the course and not passed the course.*

Each semester/session = 1 credit