

**Cato-Meridian Junior/Senior High School
Summer School Registration**

All information is **REQUIRED**

Student Name: _____ **24/25 Grade** _____

Student Cell phone #: _____

Parent Name: _____

Primary phone #: _____ **Additional phone #** _____

Emergency Contact: _____

Primary phone #: _____

Course Registration

students are only allowed to take 2 courses

Course #1:
Course #2

Special Education Info (check one if applicable)	
Declassified	
IEP	
504	

Bus transportation
(check one below)

☐ **Yes, my child will need transportation**

*Summer routes are different and may require your child to be picked up at a location not in front of your house. Please contact the transportation dept with any questions.

☐ **No, my child will not need transportation**

*please contact the transportation dept if you sign up for transportation and then decide that you don't need it. If your child is not picked up after a few attempts, the bus will stop coming.

Please bring this form to the counseling office **OR** email to ebarnhart@catomeridian.org by 2pm on **June 25th**. If you have any questions, please call 315-626-3439 ex 3821.