Signup Form for 8th Grade Math Enrichment Classes 2007–2008

Information and Parent Permission:

Student’s Name ________________________________________________________

Parent/Guardian Name(s) _________________________________________________

Address _______________________________________________________________

______________________________________________________________________

Phone numbers ________________________________________________________

Email addresses________________________________________________________

Emergency contact______________________________________________________

Class Preference:  

Algebra___ Algebra Plus___ One or the other, not sure yet___

(Placement in Algebra Plus will be by permission, based on teacher’s evaluation and parent & student preference)

Schedule Preference (3:30–5:00pm beginning the week of October 1):

Mon____ Wed____ Thu____ Fri____ (Tuesdays are not available)

(Please rank your preferences 1–4, or X for impossible.)

Fees:

The fee is $360 per student for the academic year. Scholarships are available. The fee should be paid by the first day of class, payable to Friends of TOPS. If you decide to withdraw by November 1, you can receive a full refund. No refunds after November 1.

Parent Volunteering Opportunities:

Organizing snacks:___ Carpooling:___ Classroom assistance:___ Grading homework:___

I give my permission for the student named above to participate in the Math Enrichment program.

Parent/Guardian signature_________________________________________________

Please return completed form to Mr. Ellis by Wednesday, September 26, 2007.
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Student Agreement:

Student’s Name ________________________________________________________

Why do you want to take the math enrichment class? ___________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

By signing below, you agree:

• To fully participate in the Math Enrichment program.
• To attend all regular weekly sessions, unless excused for good reason.
• If you have to miss a session, to find out from another student what was covered
  and what new work was assigned.
• To put your best effort into doing all assigned homework problems.
• To be attentive and respectful of the other students and teacher during class.
• To let the instructor know if you have questions or if there are parts of the
  material that you are having a hard time understanding.
• Not to abuse the privilege of working quietly together on enrichment homework
  during regular math class, if allowed.

Student signature________________________________________________________

Please return completed form to Mr. Ellis by Wednesday, September 26, 2007.