



# Barona Indian Charter School

## Summer Impact

### 2022 Summer School Registration

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student First Name                      Student Last Name                      Date of Birth

\_\_\_\_\_  
Mailing Address                      City                      State                      Zip

\_\_\_\_\_  
Parent Name    Parent Cell Phone Number

**Grade Level June 2022:**  
                    2      3      4      5      6      7      (Please circle one only)

EACH STUDENT WILL PARTICIPATE IN THE SUMMER IMPACT PROGRAM  
FOR ACADEMIC SKILLS AND ROBOTICS CAMP  
DAILY - 8:00AM - 12:00PM

My child will attend the summer program from **July 5 to July 28**  
from **8:00am to 12:00pm** on **Mondays to Thursdays:**

\_\_\_\_\_  
I certify that the above information is true.

\_\_\_\_\_  
Parent's Name (print)

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Phone Number