

# SMU Summer Youth Program REGISTRATION FORM

PLEASE COMPLETE ALL REQUIRED INFORMATION BELOW, AS WELL AS THE [AUTHORIZATION/LIABILITY RELEASE FORM](#), THEN PRINT OR SAVE THE FORMS AND SUBMIT VIA:

|                                    |                                                                                                 |                                                                                                                                                                 |
|------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FAX</b><br>972-473-3449         | <b>MAIL</b><br>Summer Youth Program<br>SMU-in-Plano<br>5236 Tennyson Parkway<br>Plano, TX 75024 | <b>IN PERSON</b><br>Summer Youth Office<br>SMU-in-Plano   Building One<br>5236 Tennyson Parkway<br>Plano, TX 75024<br>(corner of Tennyson Pkwy & Democracy Dr.) |
| <b>EMAIL</b><br>smu.summer@smu.edu |                                                                                                 |                                                                                                                                                                 |

## REGISTRANT INFORMATION

IS THIS YOUR FIRST YEAR AT SMU'S SUMMER YOUTH PROGRAM?

☐ YES ☐ NO

|                            |                       |                                                 |
|----------------------------|-----------------------|-------------------------------------------------|
| Child's Name               | First _____           | Last _____                                      |
| Child's Birthdate          | _____ / _____ / _____ | T-shirt size _____                              |
| Entering Grade (Fall 2013) | _____                 | <b>NOTE: One t-shirt per child, per summer.</b> |
| Parent/Guardian Name       | First _____           | Last _____                                      |
| Mailing Address            | Street _____          |                                                 |
|                            | _____                 |                                                 |
|                            | City _____            | State _____ Zip _____                           |
| Home Phone                 | _____                 | Work Phone _____                                |
| Other Phone                | _____                 | Fax _____                                       |
| Primary Email              | _____                 |                                                 |

**NOTE: This address will be used to communicate important registration and workshop information.**

## COURSE SELECTION

| COURSE CODE | COURSE TITLE | START DATE | COST |
|-------------|--------------|------------|------|
|             |              |            |      |
|             |              |            |      |
|             |              |            |      |
|             |              |            |      |
|             |              |            |      |
| TOTAL COST  |              |            | \$   |

## EXTENDED DAY OPTIONS

| OPTION                              | TIME              | # OF WEEKS | COST PER WK            |
|-------------------------------------|-------------------|------------|------------------------|
| BEFORE AM SESSION ONLY              | 7:30 – 9 AM       |            | \$ 40                  |
| BETWEEN SESSIONS (SUPERVISED LUNCH) | NOON – 1 PM       |            | \$ 25                  |
| AFTER AFTERNOON SESSION ONLY        | 4 – 5:30 PM       |            | \$ 40                  |
| ALL DAY (AM/PM + LUNCH)             | 7:30 AM – 5:30 PM |            | \$ 95<br>(SAVE \$ 10!) |
| TOTAL COST                          |                   |            | \$                     |

## PAYMENT INFORMATION

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**COUPON CODE:**

**TOTAL PAYMENT:**

**PAYMENT METHOD:**

☐ Check (payable to SMU)

Check Number: \_\_\_\_\_

☐ MasterCard

Cardholder Name: \_\_\_\_\_

☐ VISA

Billing Address: \_\_\_\_\_

☐ *Same as Mailing Address*

☐ Discover

☐ Diner's Club

**CREDIT CARD #:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_\_ / \_\_\_\_\_

**CSV:** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CANCELLATION, REFUND AND TRANSFER POLICIES

Should SMU cancel a workshop, you will be notified in advance and full fees will be refunded. If you have a situation that prevents your child(ren) from participating in the course for which they are registered, we will gladly assist you. Partial refund, transfer and escrow options are available to students before the first day of the course.

- No refunds are permitted after a workshop begins.
- No refunds are permitted due to absences from part or all of a workshop.
- No refunds are permitted in the event that SMU must cancel individual sessions of a workshop due to inclement weather or other extenuating circumstances beyond our control.

## WE HAPPILY PROVIDE THE FOLLOWING OPTIONS:

### Before class begins

- You may request a refund. Refund requests must be made no later than 12 noon on the Monday prior to the start of a workshop (one week in advance) after which time no refunds will be issued. If you choose to cancel your registration, a \$25 processing fee per workshop will be withheld from your refund.
- Students may transfer to another summer youth course free of charge.
- Student may elect to have tuition placed in escrow for themselves or another student free of charge. *(Credit must be used by May 31, 2014.)*
- Students may substitute another individual in their place free of charge.

### After class begins

- Students may transfer to another summer youth course free of charge.
- Student may elect to have tuition placed in escrow for themselves or another student free of charge. *(Credit must be used by May 31, 2014.)*
- Students may substitute another individual in their place free of charge.