## Valley Middle School of STEM Summer School Registration Form

Student Name: _____

Current Grade: _____ Current Elementary School: _____

Parent Name: _____

Address: _____

Daytime phone where parent/guardian can be reached: _____

**All Summer School students must follow the rules and expectations of Valley Middle School of STEM and ISD 196. I understand the behavioral expectations for my child during summer school.**

Parent Signature: _____

Student Signature: _____

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**Bus Transportation Requested? Yes or No**
**(If yes, please fill out the request below)**

ISD 196
Summer School Academy Transportation Request
(Fill out only if transportation is required)

Student Name: _____

Address: _____