

# Registration (Please select all that apply below)

## SMALL GROUP REMEDIAL/CONSOLIDATION GRADES 1 TO 8

- Session 1: June 29 - July 3                      Tuition Fees: \$300.00
- Session 2: July 6- July 10                      Tuition Fees: \$300.00
- Session 3: July 13 - July 17                      Tuition Fees: \$300.00
- Session 4: July 20 - July 24                      Tuition Fees: \$300.00

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## PREPARATION FOR GRADE 9 ENGLISH

- Session 1: June 29 - July 3                      Tuition Fees: \$600.00
- Session 2: July 13 - July 24                      Tuition Fees: \$600.00

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## PREPARATION FOR GRADE 9 MATHEMATICS

- Session 1: June 29 - July 3                      Tuition Fees: \$600.00
- Session 2: July 13 - July 24                      Tuition Fees: \$600.00

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## SHARPEN YOUR SKILLS - GRADES 1 - 8

- Session 1: July 27 - 31                      Tuition Fees: \$400.00

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REGISTRATION & REFUND POLICIES 1. Payments for all sessions must accompany the registration form. A deposit of one week tuition is required. This will be applied to your child's first week in attendance. 2. The balance of the tuition should be in the form of post-dated cheques, dated the Friday before each remaining week. 3. Please make cheques payable to MENTOR BRIGHT EDGE SUMMER SCHOOL 4. There will be a service charge of \$50 for all NSF cheques. 5. Mentor Bright Edge Summer School will not refund fees for any session cancelled. I have read, and understand all information in this registration package and agree to abide by the conditions outlined.

DATE: \_\_\_\_\_ SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

# Mentor Bright Edge Summer School



40 Forest Avenue, Mississauga, L5G 1L1

Elementary & Grade 9 Preparation

PHONE: 905-271-3393

FAX : 905-271-8367

E-MAIL : [klutz@mentorcollege.edu](mailto:klutz@mentorcollege.edu)

# Registration Form—Summer 2020

Mentor Bright Edge Summer School runs from 9:00 am to noon for four weeks. The main focus for grades one to eight will be on reading, writing, and mathematics. Students in these programmes enroll for a variety of reasons—they may be new Mentor students trying to upgrade their skills, current students getting a refresher on the concepts taught the year before, or students without Mentor College affiliation who want a quality summer programme so that they may get ahead and progress at their own school. The material and major concepts of each course in the Mentor College programme are covered, ensuring that both new and returning students have a solid background for the upcoming year.

In addition, "Preparation for Grade 9" courses are offered in mathematics and English. These non-credit courses are designed to help students entering grade 9 in the fall. In mathematics, students will review grade 8 concepts and extend into the beginning of the grade 9 programme. In English, students will work through a novel study with a focus on writing and comprehension.

Mentor Bright Edge Summer School also offers a "Sharpen Your Skills" programme. It is designed as both a refresher course of the concepts covered the year before, and a chance to get "back in the groove" of schoolwork for the upcoming year.

For more information about Mentor Bright Edge Summer School, please contact the director, Kelly Lutz, by phone at the Main Campus (905) 271- 3393.

Date of Registration: \_\_\_\_\_

## STUDENT INFORMATION

Name: \_\_\_\_\_ Gender: \_\_\_\_\_  
(Last name first)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Day,Month,Year)

Name of School most recently attended: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Grade Level Completed: \_\_\_\_\_

## FAMILY INFORMATION

Name of Parents/Guardian (Mr./Mrs./Dr./Ms.)

Parent: \_\_\_\_\_ Parent: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Address: \_\_\_\_\_  
\_\_\_\_\_

Postal Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Number: \_\_\_\_\_ Home Number: \_\_\_\_\_

Business Number: \_\_\_\_\_ Business Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

\*\*\*Emergency contact in case parent/guardian is unavailable\*\*\*

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Number: \_\_\_\_\_

Student's Health Card Number: \_\_\_\_\_

Health Concerns:(Allergies,Medications,etc.) \_\_\_\_\_  
\_\_\_\_\_

In case of an emergency, if parent or emergency designate cannot be contacted, I give permission to Mentor Bright Edge Summer School to seek medical assistance and treatment as may be deemed necessary. I have read, and understand all of the information in this registration package and agree to abide by the conditions outlined.

Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_