

Winterim 2018-2019 Selection Form

Name _____ Grade _____

Select a 1st, 2nd, and 3rd choice for the morning and for the afternoon by writing the appropriate number choice in front of the class, trip or internship you wish to participate in. Please return this form to school by Friday, December 14, 2018.

Classes:	Choice Number		Cost
Morning		Trebuchet Catapult	\$15
		Food Science	\$30
		Holy Spirit & Art	\$20
		Build a Fictional World	No Cost
		Latin America Culture	\$10
Afternoon		Bible Journaling Café	\$20
		Lights, Camera, Action - Video Production	\$20
		Lots of Labs	No Cost
		Select a Project	Varies

OR

Trips:	Choice Number		Cost
Day Trip		Adventure Week	\$100
Overnight		New York City – 3 days, 2 nights	\$400
		Missions – Guatemala	

OR (Juniors and Seniors Only)

Internship		Attach appropriate paperwork.
College Visits		Attach appropriate paperwork.

I give my permission for my child to participate in the Winterim trip/classes selected above. I give permission for my child to be transported to needed locations for the Winterim classes/trips. In the event of illness or injury I authorize the designated school chaperones to give consent for any medical treatment, procedure, and hospitalization if I cannot be reached. In the event my child must return home early I understand I will be responsible to cover the needed transportation costs.

Parent Signature _____ **Date** _____

Office Use Only: Date/time form handed in: _____ Date: _____ Time: _____
