

Family Name _____

Field Trip
Registration

San Diego Symphony-The Composer is Dead

Location	Location	Start-End	Price	RSVP
Symphony Hall Jacobs Music Center 750 B St. San Diego, CA 92101	Tuesday, October 22, 2019	10:00 am - 11:00 am Check in 9:30 am	\$5 per person	Friday October 4, 2019 (Min. 20/Max. 20)

*When submitting this registration form, you must have already provided TLC with a master liability waiver that includes any medical information about your student. It is your responsibility to update your student's medical information as necessary with the school by completing a new Master Waiver.

*Students must be in good standing (academic/behavioral) to attend events.

*Priority is based upon the returned date. First come - first serve.

*Payment is required at the time of registration. Cash payment must be the exact amount. Checks payable to The Learning Choice Academy. No refunds or reimbursements once RSVP is submitted.

*Parents are responsible for providing transportation and supervision. If your student will be attending with another adult or family, a written note must accompany the registration stating your detailed permission.

Parent Name (Last, First):	Total Adults:	Total Students:	Total Siblings:
Phone:	Site (circle one): Chula Vista Scripps Ranch		
Email:	La Mesa Temecula		
Names of those attending	Relationship to Student	Grade/Age	Form of Payment <small>Extended Units for students only</small>
1.	Parent Student Sibling		Cash_____ Check_____ EU's_____
2.	Parent Student Sibling		Cash_____ Check_____ EU's_____
3.	Parent Student Sibling		Cash_____ Check_____ EU's_____
4.	Parent Student Sibling		Cash_____ Check_____ EU's_____
5.	Parent Student Sibling		Cash_____ Check_____ EU's_____
6.	Parent Student Sibling		Cash_____ Check_____ EU's_____
Special Instructions: Recommended for grades 2-8. Children must be 3 years or older to attend. Additional parking fee.			
Signature:		Date:	Total Cash:
			Check #: Total:
(For Internal Use Only) Received by: _____ Date: _____ Entered into FMP by: _____ Date: _____ Sent to EU Dept: _____ Date: _____			Total Amount:

*only 1 check is needed per event/family