Mt. Lebanon School District Summer Learning Center (SLC) 2022 Registration

Student Name (Last)	(First)
Street Address	Zip Code
City	State
Daytime Phone ()	Emergency Phone ()
Parent/Guardian Name	
Parent/Guardian Email	
Current Grade (2020-2021 School Year)	
School Building (2020-2021 School Year)	
form, I am enclosing the following:	mmer Learning Center. In addition to this registration
Completed Health Office Er	,
Please select one of the followin	
 -	t to "Mt. Lebanon School District SLC"
I am requesting an available	e scholarship to waive the cost of this year's program
Registration is	due by Friday, May 6, 2022.
_	is received after May 6 th will be placed on a waiting lis registration was received.
Please return registration from, emergenc	y contact form, and tuition payment to:
Mt. Leb	anon School District
At	ttn: Lisa Shank
Summ	er Learning Center
37 R	obb Hollow Road
Pitts	burgh, PA 15243
Space is limited; attendance confirm	mation will be e-mailed or mailed to you in June.

(Office Use Only) Date Received:_____ Check # _____Amount: ____

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If you have any questions, please contact your building principal or co-coordinators Kara Shields (kshields@mtlsd.net) or Sara Halaja (shalaja@mtlsd.net)

Office Use Only) Date Received:	Check #	Amount:	