

Registration for Camp Benchmark 2010

Please mail checks or money orders to: **CB Community School, 16 Welden Drive, Doylestown, Pa 18901**

Students Name _____

Grade **currently** enrolled in _____ (2009-2010) Home School _____ Current Teacher _____

Home Address _____

Parent's Name _____ Home Phone _____

Mother's Work Phone # _____ Father's Work Phone # _____

Session 1	Benchmark Course Name -	Course Number	Fee \$150
Session 2	Benchmark Course Name -	Course Number	Fee \$150

Visa _____ Mastercard _____ Amex _____ Discover _____ Total \$ _____

C.C. Number _____ Exp. Date _____

Signature _____

Check enclosed \$ _____ Please make Payable to: **CB Community School**
 Mail to: Central Bucks Community School, 16 Welden Drive, Doylestown, Pa 18901