



S.P.A.C.E. Application

Summer Program for Advancement, Challenge, & Enrichment

Child's Name _____ Birth Date _____

Child's E-Mail Address _____ Sex _____

Address _____

City _____ ZIP _____ ☎ _____

School _____ Current Grade _____

Mother / Primary Legal Guardian _____

Home ☎ _____ Work ☎ _____ Cell ☎ _____

E-Mail Address _____

Father / Secondary Legal Guardian _____

Home ☎ _____ Work ☎ _____ Cell ☎ _____

E-Mail Address _____

Applying for _____ Day Program Only **\$150 Deposit** _____ Full Overnight Program **\$300 Deposit**

The S.P.A.C.E. program will teach and guide each student individually based on what s/he is needing or wanting to learn in this unique independently paced program.	Interested in <input type="checkbox"/> Relearning Material from the Previous Year <input type="checkbox"/> Getting Ahead for the Coming Year <input type="checkbox"/> Studying a New Subject of Interest
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Area of Desired Study _____

Enclosed is check number _____ made out to *Mars Academy* for \$ _____.

I understand that the balance payment is required by June 1st.

[Deposit is non-refundable, unless program is full when application is received or unless child is not accepted.]

Signature _____ Date _____

Please complete, print, sign, and return this Summer Program Application by mail, with deposit check, to:
Mars Academy
Attn: S.P.A.C.E.
PO Box 572572
Tarzana, CA 91357-2572