Receipt	Number		

School District of Haverford Township Summer School - 2022

HAVERFORD TOWNSHIP RESIDENTS

(Haverford High School Students)

APPLICATION FOR ORIGINAL CREDIT COURSES

Course: Date:				
Student's Name:				
Address:				
		Phone:		
School last attended			- 2	
This year I was in gra	ade	I have an IEP: YES	S NO	
	00 will be charged fo	• ,	. There will be no refunds	
			ayment to HHS c/o Ms. Pat	ti
 Access PayPa 	al payment via the fol	llowing link:		
o https://h	naverfordsd.corecom	merce.com/summer-sessi	ion/	
Signature of Parent	/Guardian	Emergency T	elephone Number	