

Parkview Community School

Summer Health and Personal Fitness (PE)

* Summer Health & PE will be offered <u>online</u> through PHS Community School.

Does your student need to free up his or her schedule to allow for band, theater, chorus, strings, or athletics? If you answered yes, then you should consider allowing your student to take Health and Personal Fitness (PE) during the Summer of 2023 through the Parkview Community School located at Parkview High School.

- Classes will meet virtually, M-TH, Class begins Wednesday, May 31, and ends Thursday, June 29.
- To register, complete the attached registration form and send it by May 22 to Parkview Community School, 998 Cole Drive SW, Lilburn, GA 30047. Registration opens March 1, 2023.
- The fee is \$250.00 per class. (Health + PE = \$500.00)
- Trickum MS and Parkview HS students should make payment through MyPaymentsPlus no later than Monday, May 22. Be sure to select Parkview HS and <u>NOT</u> GOC. Look in the category of "Community Schools." The Summer Health-PE Registration Form must also be completed and submitted to the Community School. (Address at bottom of page 2)
- Non-Trickum students may pay with a check. Payments and registration forms must be received by Monday, May 22. (See page 3.)

If registering for the summer programs through Parkview Community School, parents <u>should not register</u> their students for Health and Personal Fitness as a 9th Grade course offering at Parkview High School. The Curriculum Office at Parkview will be provided the names of the students who complete Summer Health and Personal Fitness.

Details for the summer classes:

- Classes will take place in a Digital Learning Day format, including Zoom or Google Meet sessions.
- Students must have access to a smartphone in order to use a fitness app to track time and pace of their exercise.

The attached registration form contains a contract that students and parents must read, sign, and abide by at all times. To receive credit for the classes, students must not exceed the allowed number of absences.

Parents and students should remember these important items that are contained in the registration contract:

- 1. No more than **2** absences are allowed. Students may be withdrawn if attendance requirements are not met. Any student who knows that he or she will not meet attendance requirements should **not** register for these classes. *Due to final exams, absences are not permitted on the final 2 days of class. Exams must be taken on assigned Exam Day(s). If the final is missed, a zero will be recorded in the grade book for the assessment(s).*
- 2. Students can be withdrawn for disciplinary reasons. The GCPS code of conduct applies to these courses.
- 3. A full refund is available only for students withdrawn on or before May 26.

Parents are encouraged to make a copy of the completed contract and keep this top page for their records. In mid-May, parents of registered students will be sent an e-mail reminder. For additional information, please call Parkview Community School at 770-806-3796 or email <u>Parkview.Community.School@gcpsk12.org</u>.

MyPaymentsPlus Deadline: Monday, May 22 Registration Form Deadline: Monday, May 22

PARKVIEW COMMUNITY SCHOOL SUMMER HEALTH/PE REGISTRATION FORM

DATES: May 31 – June 29 CLASS DAYS (online): Monday – Thursday TIMES: Flexible

IMPORTANT: Registration form <u>must</u> include student full name, student number, and parent/guardian email. ***PLEASE PRINT CAREFULLY***

Student FULL Name:			Student ID#	
First	Middle	Last		
Home High School: Parkview or Other	·	_ Grade: 🗆 Risi	ng 9 th Grade <u>or</u> 🗆	
Student Birthdate:///				
Check Course Name(s): [2] <u>Health (17.0110001</u>) and/or [2] <u>Personal Fitness (PE) (36.0510001)</u>				
Student Address:		City:	Zip:	
Parent/Guardian 1 Name:		Relationship:		
Parent/Guardian 1 Email:		Daytime Phone:		
Parent/Guardian 2 Name:		Relationship:		
Parent/Guardian 2 Email:		Daytime Phone:		
Emergency Contact:		Daytime Phone:		

COMMUNITY SCHOOL PLUS ADVISEMENT, REGISTRATION, ENTRANCE/WITHDRAWAL & BEHAVIOR CONTRACT

- 1. I understand that I should log on and complete all assignments in a timely manner.
- 2. I understand that withdrawal from class will occur for nonattendance. It is my responsibility to notify my parents/guardian if I am absent or withdrawn from class.
- 3. I certify that I have received a copy of the Gwinnett County student handbook. I accept the responsibility for reading the requirements and I understand the consequences for violation of these policies. I expect the procedures that are listed therein to be enforced by the teachers and administrators. I agree to abide by the rules and regulations outlined.
- 4. I understand the following refund policy: (A) Full refund for withdrawal before May 26th; (B) Nonrefundable fee of \$25 assessed for withdrawal less than a week before class begins; (c) No refund after class begins.
- 5. It is my responsibility to register for the correct class and to make sure that I have met any prerequisites.
- 6. I will pay the required \$250 per course tuition before officially being registered (\$500 for both courses).
- 7. Credit will be given only for students fulfilling academic and attendance requirements.

NOTICE: Classes will not be held unless enough students register. In the event of class cancellation, tuition will be refunded.

I/We agree to the above entrance, withdrawal, and behavioral contract. (BOTH PARTIES MUST SIGN)

Student Signature:	Date:		
Parent/Guardian Signature:	Date:		
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MAIL OR DELIVER THE REGISTRATION FORM TO: PARKVIEW COMMUNITY SCHOOL, 998 COLE DRIVE SW, LILBURN, GA 30047 *GCPS Students ONLY

Non-Trickum / Non-Parkview Students ONLY

If paying with check, complete the registration form along with this page and mail both forms to Parkview Community School 998 Cole Drive SW Lilburn, GA 30047

All forms should be received by the Parkview Community School by Monday, May 22, 2023. Checks should be made payable to the Parkview Community School. Registrations cannot be accepted over the phone.

REGISTRATION DEADLINE: MAY 22, 2023

Check #_____

FOR OFFICE USE ONLY: Date Received:

_____ Initials_____