

BAC SUMMER ACADEMY 2015 APPLICATION FORM

STUDENT INFORMATION

STUDENT NAME _____ STUDENT EMAIL _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PARENT'S NAME _____

PARENT'S EMAIL _____ PARENT'S PHONE _____

HIGH SCHOOL _____

TEACHER OR GUIDANCE COUNSELOR PROVIDING YOUR RECOMMENDATION _____

TEACHER OR GUIDANCE COUNSELOR'S EMAIL ADDRESS _____

I AM PLANNING TO APPLY FOR A SCHOLARSHIP HOUSEMAN FINANCIAL NEED BOTH _____

REGISTRATION & PAYMENT INFORMATION

To register, complete this form and return with the following:

- Full tuition payment of \$1,500 A letter of recommendation from a teacher or guidance counselor on school letterhead

Note: Balance of tuition for scholarship applicants receiving partial awards is due after May 1st.

Mail this form to: Boston Architectural College
Summer Academy, The Practice Department
320 Newbury Street, Boston, MA 02115

Or Email: henry.miller@the-bac.edu

I understand all the rules regarding registration, fees and refunds:

SIGNATURE OF PARENT / GUARDIAN _____

NAME OF CARDHOLDER _____

PAYMENT TYPE: VISA MC DISC AMEX MO CHECK _____

CARD NUMBER _____ EXPIRATION DATE _____ SIGNATURE OF CARDHOLDER _____

How did you hear about Summer Academy?

- FRIEND / FAMILY MEMBER WEB TEACHER OR GUIDANCE COUNSELOR BAC MAILING SUMMER OPPORTUNITIES FAIR AD OTHER _____

REFUNDS & CANCELLATIONS

Refunds must be requested in writing and will be processed according to the Boston Architectural College's refund policy. Contact practice@the-bac.edu for more information.

OFFICE USE ONLY

ACCEPT CODE # _____ TUITION ASSESSED _____ PRACTICE INITIALS _____