



SOUTHWESTERN ACADEMY

“A Place Where You Belong!”

2800 Monterey Road • San Marino, California 91108
• Phone: 626-799-5010

• E-Mail: Admissions@SouthwesternAcademy.edu
• Website: www.SouthwesternAcademy.edu

SUMMER 2025

Registration Information (Please print)

STUDENT #:	LAST NAME:	FIRST NAME:	NICKNAME:
GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female	DOB:	COUNTRY OF CITIZENSHIP:	CURRENT GRADE LEVEL:
SUMMER HOUSING: <input type="checkbox"/> Boarding Student <input type="checkbox"/> U.S. Commuting Student			

Please check the program you are interested in:

San Marino, California Campus

For students seeking full academic/ELL credit, or Enrichment classes:

		<u>Boarding Tuition</u>	<u>U.S. Day Tuition</u>
6-week Session- English 1	June 2 – July 11	£ \$10,500	£ \$5,400
6-week Session- ELL &	June 2 – July 11	£ \$10,500	£ \$5,400
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- Boarding tuition includes housing, meals, and tutoring as needed.
- U.S day tuition is for U.S. Citizen & Permanent Resident (five days, includes lunch).
- An incidental deposit of \$500.00 for the 6-week session. Any unused funds will be returned to parents 30 days after the end of the session or the funds will rollover for the following school year.

**Students will not be placed in courses for which they have not met the prerequisites. Not all levels of every class will be available during the summer but we will do our best to meet the needs of all students.*

By signing this form, the individual agrees to pay *non-refundable tuition*, applicable to Southwestern Academy for summer programs described in this application. The non-refundable tuition amount is due by April 23rd. A tuition statement will be sent for billing.

Parent Name _____

Parent Signature: _____ Date: _____

FOR OFFICE USE ONLY

Student Type: <input type="checkbox"/> Returning Student	_____ Tuition Payment	_____ ELL Placement Test (if needed)
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Information About (check one):

Father Stepfather

First Name Middle Name Family/Last Name

E-Mail Address

Street Address

City, State/Province, Country

Zip/Postal Code

Home and/or Cell Telephone (inc. area/country code)

Parent Signature:

Do you read English? Yes No

Information About (check one):

Mother Stepmother

First Name Middle Name Family/Last Name

E-Mail Address

Street Address

City, State/Province, Country

Zip/Postal Code

Home and/or Cell Telephone (inc. area/country code)

Parent Signature:

Do you read English? Yes No

If parent(s) cannot be reached, please indicate persons authorized to contact in case of an emergency:

1. **Name:** _____ **Relationship:** _____

Address: _____

Street Address City State/Province Country Zip/Postal Code

Area Code/Phone Number: _____ E-Mail: _____

1. **Name:** _____ **Relationship:** _____

Address: _____

Street Address City State/Province Area Country Zip/Postal Code

Code/Phone Number: _____ E-Mail: _____