



**GEORGETOWN SCHOOL DEPARTMENT**

*Office of the Superintendent*

51 North Street

Georgetown, MA 01833

978-352-5777

*Carol C. Jacobs*  
*Superintendent of Schools*

*Jack Tiano*  
*Director of Student Services*

**Penn Brook 2017 Summer Program Tuition**

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Please check all that apply. I would like to enroll my child in the Penn Brook 2017 Summer Program for the following weeks:

- Week 1 – July 5<sup>th</sup> – July 8<sup>th</sup>
- Week 2 – July 11<sup>th</sup> - 13<sup>th</sup>
- Week 3 – July 18<sup>th</sup> - 20<sup>th</sup>
- Week 4 – July 25<sup>th</sup> – 27<sup>th</sup>
- Week 5 – August 1<sup>st</sup> – 3<sup>rd</sup>
- Week 6 – August 8<sup>th</sup> – 10<sup>th</sup>

Please submit \$70.00 for each week of enrollment to Georgetown Public School District. If your child is enrolled for all 6 weeks, then the \$10 per week discount applies and the balance due will be \$360.

Please make checks payable to *The Town of Georgetown*