

Western Suffolk BOCES Regional Summer School 2026 Student Registration Form

STUDENT NAME _____
LAST FIRST MI

FEMALE MALE DATE OF BIRTH ____/____/____ AGE _____

ADDRESS _____ HOME PHONE _____

PARENT/
 GUARDIAN NAME (PRINT) _____ WORK/CELL PHONE _____
 PARENT/ LAST FIRST

GUARDIAN E-MAIL _____ EMERGENCY CONTACT _____ EMERGENCY# _____

HOME DISTRICT: Please check one (A shaded box indicates a district is participating in the Regional Summer School)

Babylon	Commack	Cold Spring Harbor	Huntington	Copiague
Deer Park	Elwood	Half Hollow Hills	Harborfields	Amityville
Kings Park	Lindenhurst	North Babylon	Northport-East Northport	Smithtown
South Huntington	West Babylon	Wyandanch	Other: _____	

Please place a check in the box to the right of the Course(s), Examination(s) and/or Review Class you wish to enroll in.

Courses		Regents Examinations	Review Class (ONLY ONE)
Middle School English (NB ONLY)	Middle School Social Studies (NB ONLY)	Algebra II (Common Core)	Algebra II (Common Core)
English 9 (CC) (R)	Global History I	English (Common Core)	English (Common Core)
English 10	Global History II	Algebra 1 (Common Core)	Algebra 1 (Common Core)
English 11	US History/Government (R)	Geometry (Common Core)	Geometry (Common Core)
English 12	Government/Economics	Global History	Global History
Health	Middle School Science (NB ONLY)	US History/Government	US History/Government
Middle School Math (NB ONLY)	Chemistry (R)	Chemistry	Chemistry
Geometry (CC) (R)	Chemistry Lab Hours (R)	Earth and Space Sciences	Earth and Space Sciences
Algebra I(CC) (R)	Grade 6 Multidisciplinary	Life Science: Biology	Life Science: Biology
Algebra II (CC)	ENL Global History (R)		
Advanced Algebra	ENL Beginner		
Advanced Geometry	ENL Intermediate		
Spanish I (Middle School)	ENL Algebra (R)	PLEASE LIST ANY MEDICAL CONDITIONS THAT OUR SCHOOL NURSE NEEDS TO BE AWARE OF BELOW: (If none, write none)	
Spanish II	ENL USHG (R)		
Physical Education	Senior Seminar		
Life Science: Biology (R)	Life Science: Biology Labs		
Earth and Space Sciences (R)	Earth and Space Sciences Labs		

ALL ITEMS BELOW MUST BE COMPLETED BY THE HOME SCHOOL DISTRICT OR REGISTRATION WILL NOT BE ACCEPTED

HOME DISTRICT BEDS CODE _____ FOR 2025-26 SCHOOL YEAR: GRADE LEVEL _____

SCHOOL ATTENDED _____ SCHOOL BEDS CODE _____

HOME DISTRICT STUDENT ID # (MAX OF 9 DIGITS) _____

Are all required health immunizations up to date and on file in the home school? Yes No
 **Student has an IEP Yes No **Student has a 504 Yes No **Please attach a CURRENT copy to this form

ENL Student Yes No Exam in Alternate Language Yes No Next Day Testing for ELL/MLL Yes No

Enlarged Exam Needed for IEP: Yes No

Please specify language _____

Home School Principal/designee signature (REQUIRED) _____ Home School Phone # _____

PARENTAL CONSENT

Fees for Non-participating District Students: \$360 per course ----- \$175 per review class ----- \$150 per examination _____

Money Orders only (Payable to host districts Huntington UFSD or North Babylon UFSD)

All fees must be paid in full at registration. NO REFUNDS will be made except in the case of cancellation of a class for insufficient enrollment.

Parent/Guardian Signature (REQUIRED) _____ Date _____