



Visite el portal para padres y seleccione
"Registrarse"

Head of Household

* Denotes required field

Save Save & Next

First Name *	Last Name *	Gender *	
<input type="text" value="Micheal"/>	<input type="text" value="Hooker"/>	<input type="text" value="Male"/>	
Address			
Address		Address 2	
<input type="text" value="322 Chapanoke Road"/>		<input type="text" value="Address Line 2"/>	
City	State	Zip	Country
<input type="text" value="Raleigh"/>	<input type="text" value="NC"/>	<input type="text" value="27603"/>	<input type="text" value="United States"/>
Home Phone	Mobile Phone *	Work Phone	Other Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Complete la información tanto del tutor como del miembro (estudiante)

Members

Please select School Year and Membership Type you wish to enroll your child to

Enroll	First Name	Last Name	School Year	Membership Type	Grade	Price
<input type="checkbox"/>	Bennett	Bell	School Year	Membership Type	1	\$0.00
<input type="checkbox"/>	Bennett	Bell	School Year	Membership Type	2	\$0.00

Total Amount: \$0.00

School Year dropdown: CMS 20-21, CMS 2022-2023 ✓

Haga clic en el interruptor de inscripción a "SÍ" y luego seleccione "CMS 2022-2023"

<input checked="" type="checkbox"/>	Bennett	Bell	CMS 2022-2023	New Student
Total Amount:		\$32.00	Enter Coupon Code...	Membership Type
			Apply	New Student ✓
				Returning Student

Billing Information

Luego seleccione "Nuevo estudiante" en el "Tipo de membresía"

Enroll

YES

First Name

Bennett

Last Name

Bell

School Year

Summer Camp 2022

Membership Type

General Membership

Grade

1

Price

\$35.00

Las partes interesadas repetirán el proceso para inscribirse en el Campamento de Verano 2022

Billing Information

I Will Pay Later

NO

* = Required

First Name *

Micheal

Last Name *

Hooker

Email *

mhooker@cmsraleigh.org

Confirm Email *

mhooker@cmsraleigh.org

Street Address *

322 Chapanoke Road

Apt, Suite, Bldg.

Apt, Suite, Bldg.

City *

Raleigh

State/Province/Region *

NC

Zip Code/Postal Code *

27603

Country *

United States

Security is of paramount importance to us. Your credit card information is processed securely via Level 1 PCI DSS Compliant Service Provider.

Credit Card Number *

Exp. Month *

Month

Exp. Year *

Year

CVV Number *

Process

Complete el formulario "Información de facturación" y haga clic en "Procesar"

⚠ Your enrollment is being processed.

Your enrollment is being processed.

Join a Program

Después de procesar la inscripción STOP. NO "UNIRSE A UN PROGRAMA".
Recibirá un correo electrónico de confirmación con más instrucciones