



IC CATHOLIC PREP  
THE SCHOOL FOR INDEPENDENT THINKERS

217 Cottage Hill Avenue  
Elmhurst, IL 60126  
630.530.3460  
ICCatholicPrep.org

## 7th GRADE SHADOW DAY REGISTRATION FORM

### Experience a Shadow Day ~ Visit ICCP

- Follow your host's class schedule • Meet teachers and students • Participate in class •

### **7<sup>th</sup> Grade Students may shadow on February 2019 through April 2019**

- Arrive at the ICCP main office at 7:35 a.m. to meet your host. School dismissal is at 2:50 p.m. Arrange to be picked up from the main office.
- Please dress in appropriate school attire. Boys: dress pants, dress shoes, collared shirt. Girls: dress pants, dress shoes (low heels), sweater or blouse. Please no jeans, t-shirts, halter or tank tops, sweats, shorts or gym shoes.
- Lunch can be purchased in the cafeteria or feel free to bring your own.

**Send the completed form to Mrs. Nikki Kanzia, Assistant Principal/Director of Admissions & Student Life by fax: 630.530.3484 or email: nkanzia@iccatholicprep.org. Upon receipt, Mrs. Kanzia will confirm with you the scheduled shadow day and your host.**

Student's name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

I would like to shadow a student in:  honors classes  college prep classes

\_\_\_\_\_ Please find a shadow for me \_\_\_\_\_ I have a shadow choice (*freshman only*)\*

\*We always do our best to honor a shadow request however; there are times when it may not be possible.

ICCP student you would like to shadow: \_\_\_\_\_ Shadow Date: \_\_\_\_\_

**Parent Authorization:** My son/daughter, \_\_\_\_\_, has my permission to spend the day at IC Catholic Prep as a guest. I understand that he/she will abide by all the rules and regulations of ICCP. If my student will miss school, I have contacted the school to inform them that he/she will not be in school. On the day of the visit, I can be reached at the phone number below in case of an emergency.

Parent's Name (printed)

Signature

Emergency Phone Number

**Please  your top three favorite sports:**

- |                                       |  |                                   |  |                                    |
|---------------------------------------|--|-----------------------------------|--|------------------------------------|
| <input type="checkbox"/> Baseball     | <input type="checkbox"/> Cheerleading  | <input type="checkbox"/> Golf     | <input type="checkbox"/> Softball      | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Basketball   | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Hockey   | <input type="checkbox"/> Tennis        |                                    |
| <input type="checkbox"/> Bass Fishing | <input type="checkbox"/> Dance Team    | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Track & Field |                                    |
| <input type="checkbox"/> Bowling      | <input type="checkbox"/> Football      | <input type="checkbox"/> Soccer   | <input type="checkbox"/> Volleyball    |                                    |

**Which activities/clubs will you be interested in joining in high school?**

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Art Club      | <input type="checkbox"/> Liturgical Ministry | <input type="checkbox"/> World Languages Club   | <input type="checkbox"/> Math Team               |
| <input type="checkbox"/> Business Club | <input type="checkbox"/> Ecology Club        | <input type="checkbox"/> Knight Ambassadors     | <input type="checkbox"/> National Honors Society |
| <input type="checkbox"/> Chess Club    | <input type="checkbox"/> Engineering Club    | <input type="checkbox"/> Knight Times Newspaper | <input type="checkbox"/> Student Council         |
| <input type="checkbox"/> Chorus        | <input type="checkbox"/> E-Sports            | <input type="checkbox"/> Knights Theatre        | <input type="checkbox"/> Yearbook                |