

Booker High School

AICE CONTRACT

**Please complete this form and return to the**

**AICE Coordinator, Chris Hutchinson.**

I have read and understand the policies and guidelines of the BHS Cambridge AICE Entrance Agreement.

STUDENT SIGNATURE

STUDENT NAME PRINTED

PARENT NAME PRINTED

PARENT SIGNATURE

*CONTACT INFORMATION*

STUDENT E-MAIL

PARENT E-MAIL

PARENT(S) NAME

PARENT PHONE

MAILING ADDRESS

PHONE