

Shadow Visit FOR 8th GRADE GIRLS

Instructions to parents: Please call on January 11, 2010 to book an appointment to shadow.

1. Download and print this form *before* you telephone the Admissions Office.
2. **Call the admissions office** at 415-334-0525 ext. 243 to schedule a visit and complete this form.
3. After you have phoned to schedule the Shadow Visit, this completed form must be **faxed** to 415 334-9726 to **confirm the reservation** for your daughter's visit.
4. Note the appointment date and time on your personal calendar(s).
5. Retain this completed form for reference until the Shadow Visit has concluded.

Please complete:

I request and authorize that my daughter _____
Student's First Name / Last Name

visit Mercy High School-San Francisco on _____
Date

from _____AM* to _____AM/PM*

I will remind my daughter to bring a book to read on the day of her Shadow Visit.
(please check)

_____/_____
Parent's Name (Please Print) Signature Date

Student's home address City ZIP CODE

STUDENT'S CURRENT SCHOOL STUDENT'S CURRENT GRADE

_____/_____/_____
Home Phone # daytime phone # if different cell phone #s

CIRCLE THE PHONE NUMBER THAT YOU WANT USED IN AN EMERGENCY DURING YOUR DAUGHTER'S SHADOW VISIT.

***PLEASE NOTE:** It is vital that your daughter *arrive and depart* on time for this Shadow Visit as the Mercy student who will be helping her must be on time for all classes. Your daughter's visit will *begin and end* in the Main Lobby.

Please contact the admissions office with any questions: admissions@mercyhs.org or 415-334-0525 ext. 243