



***PRINT, COMPLETE, and BRING***  
**TO STUDENT SERVICES BY 2:00PM**  
**FRIDAY, SEPTEMBER 28, 2018**  
**WITH PAYMENT**  
**-Sooner if possible-**

The student identified below wishes to take the **PSAT** on October 10, 2018 (morning) at Land O' Lakes High School. The fee of \$18 is enclosed. If paying by check, make out the check to Land O' Lakes High School and write the student's name and ID number on the memo line. Note: Examination fee is *not* refundable.

Student Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

Grade (Circle One)      9                                  11

English Teacher Name \_\_\_\_\_

English Class Period \_\_\_\_\_

Lunch (Circle One)      A                                  B                                  C

Parent/Guardian Phone      (\_\_\_\_\_) \_\_\_\_\_

Enclosed is      \_\_\_\_\_ CHECK # \_\_\_\_\_ for \$18

\_\_\_\_\_ CASH received \$18