

**Grapevine High School**

**PSAT Registration Form**

**The student identified below wishes to register for the PSAT Wednesday, October 17<sup>th</sup> 2007.**

**Student Name:** \_\_\_\_\_ **ID#** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Paid** \_\_\_\_\_

Please submit this form and a check for \$15.00, made payable to Grapevine High School, to the counseling office by 3:45 p.m. on October 11<sup>th</sup>.