



La Costa Canyon High School
Counseling Department

PLAN REGISTRATION FORM

Student's Name _____ ID# _____

I am registering for the PLAN on November 8th, 2008

Please make check in the amount of: **\$19.00** payable to: **LCCHS**.

Bring this form and payment to: the **LCCHS FINANCE OFFICE**.

Registration Deadline: **Friday, October 10th**.



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