

# Grayson Community School Winter 2019



50 Hope Hollow Road  
Loganville, GA 30052  
(770)554-1073

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**Toni Warrington, Assistant,** [toni.warrington213@gmail.com](mailto:toni.warrington213@gmail.com)

HOURS: Mon. –Thurs. 1:00pm – 9:00pm; Fri. 7:00 am – 3:00 pm

| YOUTH CLASSES  |        |          |         |   |                   |       |
|--|--------|----------|---------|---|-------------------|-------|
| CLASS  | Code   | Day      | Term    | Dates   | Time              | Fee   |
| <b>Driver's Education</b><br><i>Course consists of 30 hours of classroom instruction and 6 hours of driving with an instructor after class requirement is completed. Students must have a learners permit.</i> | GR01-A | Sat      | 4 days  | 1/5; 1/12; 1/19;<br>1/26/19<br>Instructor:<br>McCarty | 8:00am-<br>4:00pm | \$345 |
| <b>Driver's Education</b><br><i>Course consists of 30 hours of classroom instruction and 6 hours of driving with an instructor after class requirement is completed. Students must have a learners permit.</i> | GR02-A | M-<br>TH | 2 weeks | 2/4/19-2/14/19<br>Instructor:<br>Hairston             | 2:30-6:15pm       | \$345 |
| <b>Driver's Education</b><br><i>Course consists of 30 hours of classroom instruction and 6 hours of driving with an instructor after class requirement is completed. Students must have a learners permit.</i> | GR03-A | M-<br>TH | 2 weeks | 3/4/19 – 3/14/19<br>Instructor:                       | 2:30-6:15pm       | \$345 |
| <b>Driver's Education</b><br><i>Course consists of 30 hours of classroom instruction and 6 hours of driving with an instructor after class requirement is completed. Students must have a learners permit.</i> | GR04-A | M-<br>TH | 2 weeks | 5/6/19 – 5/17/19<br>Instructor:                       | 2:30-6:15pm       | \$345 |
| ADULT CLASSES  |        |          |         |   |                   |       |
| Zumba – Latin inspired dance fitness – all levels  | GR05-A | Tues     | 6 weeks | 1/8/19-2/12/19  | 3:00-4:00pm       | \$54  |
| Zumba – Latin inspired dance fitness – all levels  | GR06-A | Tues     | 6 weeks | 1/8/19-2/12/19  | 6:30-7:30pm       | \$54  |
| Zumba – Latin inspired dance fitness – all levels  | GR07-A | Tues     | 6 weeks | 2/26/19-4/9/19 (no class 4/2)                         | 3:00-4:00pm       | \$54  |
| Zumba - Latin inspired dance fitness – all levels  | GR08-A | Tues     | 6 weeks | 2/26/19-4/9/19 (no class 4/2)                         | 6:30-7:30pm       | \$54  |
| Yoga – bring your own mat  | GR09-A | Mon      | 6 weeks | 1/7/19-2/25/19 (no class 1/21 & 2/18)                 | 7:00-8:00pm       | \$54  |
| Yoga – bring your own mat  | GR10-A | Mon      | 6 weeks | 3/4/19 – 4/15/19 (no class 4/1)                       | 7:00-8:00pm       | \$54  |

SAT & ACT PREP CLASSES ARE OFFERED THROUGHOUT THE YEAR AT GRAYSON HIGH SCHOOL. THESE CLASSES ARE TAUGHT BY:

**Cornerstone Academy**  
**Sycamore Learning Company**

Detailed schedules are on:

[www.cornerstoneacademic.com](http://www.cornerstoneacademic.com) (404)919-7227

[www.sycamorelearning.com](http://www.sycamorelearning.com) (678)777-6031

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## **REGISTRATION FORM**

Participant's Name \_\_\_\_\_

Date of Birth (for Driver's Ed only) \_\_\_\_\_

Home/Cell Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

| Name of Program | Date | Fee |
|-----------------|------|-----|
|                 |      |     |
|                 |      |     |

TOTAL AMOUNT DUE \$ \_\_\_\_\_

Amount Paid by Cash: \_\_\_\_\_ Check # \_\_\_\_\_

Checks should be made payable to GRAYSON COMMUNITY SCHOOL

Gwinnett County Public Schools wishes to advise you that the activity selected or enrolled in by you or your child could result in some degree of physical injury. Gwinnett County Public Schools does not have, nor is it required to have, insurance for such accidents. It is therefore incumbent upon you to properly insure yourself or your dependent. As parent, guardian or participant in Gwinnett County Public Schools Community School program it is your responsibility to provide for such exposure. By signing below as parent, guardian or participant, you acknowledge your responsibility to secure or provide proper medical coverage.

Participant/Parent/Guardian Name (Please Print) \_\_\_\_\_

Participant Signature (Parent/Guardian if under 18) \_\_\_\_\_

**Submit registration and payment at least one week prior to the first day of class.**

**Please note: DATES ARE SUBJECT TO CHANGE. (However, all students registered for a particular class will be notified of any change.)**