# Club Literacy™ Registration

Student's Name:________________________________ Date of Birth:____________________

Parent's Name:_________________________________ Child's Age:_____________________

Home Phone:________________ Work Phone:________________ Mobile:________________

How did you hear about Club Literacy?___________________________________________

Address:______________________________City:_____________________Zip:_________

E-mail:__________________________________________________________________

Emergency Contacts:_______________________________________________________

Food Allergies:___________________________________________________________

Pertinent Medical Information:________________________________________________

Class:_____________________ Day:_____________________ Time:_____________________

How did you hear about Club Literacy?___________________________________________

In consideration of your accepting this registration, I, the parent or guardian of the above named student, hereby give my consent and agree to release, indemnify, and hold harmless Club Literacy and any of their instructors from any liability, claim, or action for damages resulting from or in any way arising out of said student's participation in Club Literacy classes and/or special events.

I further acknowledge and agree that I will be fully responsible for any and all damage to any educational equipment resulting from the negligence or willful acts of the above named student while participation in Club Literacy classes and/0r special events.

I agree to pay the full monthly fee regardless of an absence and it is my responsibility to schedule a make-up class.

Please try to keep absences to a minimum of once a month unless they are unavoidable due to illness.

Signature:_____________________________________________ Date:__________________

Summer Tuition is non-refundable .

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For Office Use Only

- Check#:_________________ Amount:____________________ Month:___________________
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