

# Registration Form

## World Cup U Classes



Family Information	Programs																					
<p>Child's Full Name: _____ G <input type="checkbox"/> / B <input type="checkbox"/></p> <p>Mom's Name: _____ Dad's Name: _____</p> <p>Address _____</p> <p>_____</p> <p>Home Phone: _____ Child's Birthday _____</p> <p>Mom's Cell # _____ Dad's Cell # _____</p> <p>Family EMAIL: _____</p> <p>Emergency Contact: _____</p> <p>Phone: _____</p> <p>Allergies: _____</p> <p>_____</p>	<p>I wish to enroll my child in the following programs</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 75%;">Program Name</th> <th style="width: 15%;">Start Date</th> <th style="width: 10%;">Fee</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2" style="text-align: right;"><b>Total</b></td> <td> </td> </tr> </tbody> </table>	Program Name	Start Date	Fee																<b>Total</b>		
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Payment	
<p>Amount Enclosed: \$ _____ Check #: _____ Date: _____</p> <p>Credit Card: Visa/MasterCard/Amex Acct. # _____ Exp: _____</p> <p>Signature: _____ Date: _____</p>	<p>My child will be dropped off by:</p> <p>[ ] Bus [ ] Car</p> <p>Elementary School: _____</p> <p>My child will be picked up by:</p> <p>_____</p> <p>Name</p>

Agreement	
<p><b>Photo Waiver:</b> Photographs and videos taken during World Cup activities and programs are used for World Cup publicity and publications. Participation in programs serves as consent to use your photo for these purposes.</p> <p><b>Responsibilities:</b> World Cup can only accept responsibility for your child when he/she is under supervision of an appropriate World Cup employee. Supervision is available only at program location during program hours. Parents are responsible for notifying appropriate staff of a child's absence, late arrival, early or late pickup or any other special circumstances related to arrivals or departures.</p> <p>I have read and agree to the above.</p> <p>_____</p> <p>Signature Date</p>	<p>Please mail or fax this form with payment to:</p> <p>World Cup Nursery School &amp; Kindergarten            160 Hunts Lane,            Chappaqua, NY 10514            Tel 914-238-9267            Fax 914-238-3568            mail@worldcupschools.com            www.worldcupnurseryschool.com</p>