



2019-2020 After-School Program

Registration Form

Child's Information:

First and last name: _____

Date of birth: _____

Home address: _____

Grade/Teacher as of Sept 2019: _____

After-School Program Location:

If attending FFL **Paradise** location, please select the school from which your child(ren) will be attending:

- | | | | | |
|---|---|---|--|--|
| <input type="checkbox"/> Paradise
Elementary | <input type="checkbox"/> Elizabeth Park
Elementary | <input type="checkbox"/> Octagon Pond
Elementary | <input type="checkbox"/> Holy Family
Elementary | <input type="checkbox"/> Topsail
Elementary |
|---|---|---|--|--|

MCP #:

Allergies:

Medical/Behavioral conditions:

Other notes:

Parent's/Guardian's Information:

First and last name of parent 1: _____

Home phone number of parent 1: _____

Cell number of parent 1: _____

Email of parent 1: _____

First and last name of parent 2: _____

Home phone number of parent 2: _____

Cell number of parent 2: _____

Email of parent 2: _____

Pickup Information:

Please provide the first and last names of the people who have your permission to pick up your child from the after-school program. If an individual who is not on this list will be picking up your child on a given day, written consent must be given to program Manager/Director.

1) _____

2) _____

3) _____

4) _____

5) _____

Parent/Guardian Consent:

I, _____, give my child, _____, permission to participate in all activities planned by the French For Life team during the after-school program. **I also understand that my \$150 After School Program deposit is non-refundable.**

Date: _____

Parent's/Guardian's signature

Media Release:

I, _____, do hereby consent that French For Life Inc. has the right to take photographs, videotape, or digital recordings of my child(ren) _____ during the 2019-2020 French Immersion after-school program and to use these exclusively for the purpose of marketing. I do hereby release to French For Life Inc. all rights to exhibit this work in print and electronic form. I understand that there will be no financial or other remuneration for recording my child(ren), either for initial or subsequent transmission or playback.

Date: _____

Parent's/Guardian's signature