

Crossroads One Way Kids Arts Academy & Tutoring Begins Wednesday, February 1, 2012



Please complete this form & return it to the church office.
Questions? Contact Suzanne Willard @ 562.691.6674 or 714.879.4183

Child's Name: _____

Parent/Guardian Name: _____

Address: _____

Phone Numbers:

Home _____ Work _____ Cell _____

E-mail _____

Age _____ Birth Date _____ Grade (Fall of '11) _____

Medical or other information we need to know. (Please include any food allergies.)

Emergency Contact:

Name: _____ Phone number: _____

Dismissal Information: Who may pick up your child?

May we have permission to photograph your child & us in church publications for the purpose of promotion? Yes No

Please check which programs your child/children will be participating in

Tutoring: Begins at 5:00 pm - 5:45 pm _____ Ages K - 12th grade Amount: FREE begins February 1, 2012

Percussion & Rhythm Class (drums): 5:00 pm - 5:45 pm _____ Ages K - 6th grade Amount: \$50.00 per child
(Limit to first 6 children enrolled)

Culinary Class: 5:00 pm - 5:45 pm _____ Ages 1st - 6th grade Amount: \$50.00 per child
(Limit to first 6 children enrolled)

Dinner: Served from 5:30 pm - 6:00 pm Can be paid at \$3.00 per dinner/child or Total cost for session at \$27.00/child

Academy: 6:00 pm - 7:30 pm _____ Ages 3 yrs - 8th grade Amount \$ 50.00 per child

Amount Paid: _____ Requesting a scholarship: _____ (Scholarships are granted based on funds available)

I, the undersigned, parent or legal guardian of the participant, a minor, hereby authorizes the leaders as my agents, to consent to medical, surgical, or dental examination and/or treatment. In case of emergency, I hereby authorize treatment, and/or care at any hospital.

Your signature _____ Date _____

T-shirt size Youth : S M L Adult : S M L XL