

REGISTRATION FORM

FOR

FULL-DAY WEST INDIAN ENRICHMENT SUMMER PROGRAM

June 21- July 16: West Indian Banquet Facility, 3340 Main Street, Hartford, CT.

July 19-August 14: Martin L. King Elementary School, 25 Ridgefield St., Hartford, CT.

Registration Requirement: \$10.00 per student (CASH ONLY, non-refundable and deposit required at the time of submitting application.) The applicant MUST participate in the West Indian Parade Saturday, August 14, 2010 and attend classes every day. If the student drops out before completion of the program, parents will be held liable for a fee of \$60.00. No excuses!!! Students who have mandatory summer school can only participate in the p.m. session providing slots are available.

0 A.M. (9-12 noon) ACADEMICS

0 P.M. (1-3) FINE ARTS ONLY

NAME: _____

MALE: _____ FEMALE: _____ Promoted to Grade: _____ AGE: _____

ADDRESS: _____
Street City Zip Code

Home telephone Number (860) _____ Cell Number: _____

Emergency Contact's Name: _____ Relationship _____

Home Address: _____
Street City Zip Code

Has your child ever attended this program? YES ___ NO: ___ What year? _____

Any sibling(s) applying for the program? Please list name(s) below and grade(s):

PLEASE CIRCLE: Your child will WALK or WILL BE PICKED UP. (Only the names listed on this form will be allowed to pick up the student(s). Any changes, please write a note).

By whom:

_____ Address and City

Relationship: _____ Telephone Number

By Whom: _____

_____ Address and City

Relationship: _____ Telephone Number

By Whom: _____

_____ Address and City

Relationship: _____ Telephone Number

By Whom: _____

_____ Address and City

Relationship: _____ Telephone Number

MEDICAL HISTORY MUST ACCOMPANY THIS FORM.

Signing this form grants permission for your son/daughter (name) _____ to participate in the West Indian Enrichment Summer Program. Your signature gives permission to go on the various trips. Parents will be advised of trips and that any photographs, in which your child appearance will be, used for West Indian Foundation publicity purposes only. I, _____ also waive any claims of damages against West Indian Summer Enrichment Program, and any staff member affiliated with West Indian Summer Enrichment Program for any injury incurred during any of West Indian Summer Enrichment Program activities or trips.

Parent/Guardian Signature: _____

Date: _____

Paid: _____