Registration Form for After School Activities

Return this form, along with the fee payment, to the **TCGIS office** by **Wednesday, January 15, 2013**.

1. Children need to be picked up after the activity at 4:30pm or will be escorted to Kinderclub.
2. Fees are for the entire activity session and cannot be prorated if your child is ill or has a scheduling conflict. Once the registration deadline has been reached, no refunds or class changes will be taken.
3. Student Behavior: The same rules of student conduct that apply to the behaviors of students during the school day apply to after school activities. Failure to follow the rules of behavior, or any additional directions or instructions, may result in your child being dropped from the activity. In such an event, the unused portion of the activity fee will be refunded.
4. Scholarships: There are some funds available for scholarships to after school activities. Pick up scholarship request forms in the office. Please return with registration form. We can only grant scholarships towards TCGIS activities. For activities offered by the outside vendors, please talk directly to the instructors about scholarship opportunities.

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Student's Name:_____Grade (A, B or C):_____

Parent/Guardian(s) Name:
_____

Phone number(s):
_____ _____

Email Address:
_____

My child will participate in the following activity (activities):
_____ _____

_____ _____

Are there medical or other issues the instructor should know about? [ ] Yes [ ] No

If yes, please explain:
_____
_____

After the activities, my child will be _____ picked up or _____ go to Kinderclub.
(You are responsible for notifying Kinderclub of any changes in your child's schedule.)

Write checks to TCGIS, unless the activity is provided by an outside vendor as listed on the activity list.

TCGIS assumes no liability for instructional content nor activity supervision. I hereby grant permission for my child to participate in after school activities at TCGIS.

Parent Signature: _____ Date: _____

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For Office Use: Date Submitted:_____ Amount Paid: _____

If needed: Scholarship Form [ ]