

Trinity Academy Enrichment Program Registration Form

Name of Student: _____ Grade: _____ Age: _____

Circle One: American Girl Doll Chess Club Junior Golf Clinic

Dates: Tuesdays from February 2nd - March 22; 3:00PM - 4:00PM
(Golf is Jan 19, Feb 2, Feb 9, Feb 23 and March 1 - no session Jan 26)

Cost:

American Girl Doll \$100, Chess \$70, Junior Golf Clinic \$95
(check payable to TRINITY ACADEMY, Attn: Jennifer Hoffman)

Class is held from 2:55 until 3:55pm. Pick up is promptly at 4:00pm at the gym doors. All children who are registered for After Care will be escorted to the cafeteria. If any child is not picked up by 4:00pm they will be brought to After Care. Please send a snack in with your child.

As parent or legal guardian, you remain fully responsible for any legal responsibility that may result from any personal actions taken by the named student. I request that my child _____ participate in the event described above. I understand that this event will take place at Trinity Academy under the supervision of the Running instructor and volunteers. I further consent to the conditions stated above on participation in this event. In the event of an emergency and that my child should need medical attention, I hereby consent to such treatment in the event that I am unable to be contacted. I understand if my child has a serious allergy or medical condition that might require Benadryl / Epi Pen, insulin or asthma medication, I must call the school nurse before the start of the event. I also understand and agree that in the event that my child should suffer injury of any sort of injury while participating in the event described above, unless such injury is solely caused by their intentional or grossly negligent conduct, I agree to hold harmless, and not to pursue any claims against the school/school group sponsoring this activity, or any of its agents, servants, or employees, as a result of such injury.

In an emergency, I can be reached at: Cell: _____

Home: _____ Work: _____ Email: _____

Parent/Legal Guardian name (print): _____

Parent/Legal Guardian (signature): _____
(ALL COMMUNICATION IS DONE THROUGH EMAIL-PLEASE INCLUDE EMAIL ADDRESS)