

¡Spanish Camp! July 12 - 23, 2010 - Registration Form

CommonBond • 164 West Napa St. • Sonoma, CA 95476 • 707-933-0404 extension 120 • fax 933-1573 • anna@commonbond.us

To register your child for ¡Spanish Camp! 2010, to be held at Flowery School, please complete this form. To guarantee a space for your child, please mail the completed form to the address above with full payment, or a \$75. deposit.

Child's name _____ girl boy

Age of child _____ Birthdate _____ Nickname _____ T-shirt size _____

Address _____

Mailing address (if different) _____

Parents (Guardians') name/s _____

Phone #s: hm. _____ cell _____ cell _____

Email address _____

Name of school _____ and the grade your child will be in the fall 2010 _____ 10

Child's current knowledge of Spanish none some a lot native speaker

How /where did your child learn it?

Emergency Information – Addresses and phone numbers of people to call in case of emergency

<i>name</i>	<i>address</i>	<i>phone number</i>
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<i>name</i>	<i>address</i>	<i>phone number</i>
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Describe any physical conditions that may limit your child's ability to participate in certain activities:

Family physician _____ tel. _____

Insurance information: _____

Please check here if you attached additional medical/emergency information to this form.

*I hereby authorize the CommonBond Foundation and the staff of its ¡Spanish Camp! to act for me according to their best judgment in any emergency requiring medical attention. I have no knowledge of any physical impairment, other than as noted on this form, that would affect or be affected by my child's participation in Camp activities. **Release** - In consideration for accepting my child into ¡Spanish Camp!, I hereby waive, release, and forever discharge any rights and claims I may have against the CommonBond Foundation, its directors, employees, or agents for any and all injuries arising from my child's participation. I hereby acknowledge that the foundation retains the right to use photographs taken at camp for publicity and advertising purposes.*

signature of parent or legal guardian

date

Payment - \$ 275. tuition per child (\$50. discount for each child when enrolling siblings)

Amount enclosed \$ _____ (please make checks payable to the CommonBond Foundation).

Transportation: We desire transportation to and/or from Flowery School. Paid separately, at \$30. round trip, \$20. one way.

Notice - The CommonBond Foundation reserves the right to dismiss from the remainder of Camp any child who exhibits repeated behavior that is, in the sole discretion of the foundation, disruptive to the enjoyment of Camp activities by other children.