



Laurelhurst After School Enrichment Rooms

SAND POINT LASER LEAPS SPRING 2012 REGISTRATION CONTRACT

SPRING SEMESTER Feb. 6th - May 11th - DEADLINE FOR REGISTRATION IS FEBRUARY 3RD.

Student's Name:		Teacher :		Grade:	Classroom #:
Address:					
Zip:	Home Phone:		Home E-mail:		
Child is living with (circle one) Mother Father Both Guardian					
Mother's Name:		Alternate Phone-(indicate type):		Mother's E-mail:	
Father's Name:		Alternate Phone-(indicate type):		Father's E-mail:	

Please check the desired classes. Classrooms may be subject to change. Classes are subject to a minimum enrollment. If the minimum number of students hasn't been met after the first two weeks into the session, the class will be cancelled. You will receive a prorated refund.

MORNING CLASSES

✓	Class	Day(s)	Time	Location	Sessions	Price	Total Due
	Chinese I (K-5 th)	Wednesday	8:40 - 9:25 AM	Portable 2	12	\$145	
	Spanish I (K-5 th)	Monday	8:40 - 9:25 AM	Portable 2	12	\$145	

AFTERNOON CLASSES

✓	Class	Day	Time	Location	Sessions	Price	Total Due
	Afterschool Hoops (K-3 rd)	Monday	3:40 - 4:40PM	Gym	12	\$135	
	Art (K-4 th)	Friday	3:40 - 4:40PM	Room 114	12	\$165	
	Dance (K-2 nd)	Tuesday	3:40 - 4:25PM	Gym	12	\$155	
	Drama (K-3 rd)	Thursday	3:40 - 4:40PM	Gym	12	\$160	
	Lego by Bricks4Kidz (K-3 rd)	Tuesday	3:40 - 4:40PM	Portable 2	12	\$135	
TOTAL DUE TO LASER LEAPS (Make checks payable to LASER LEAPS)							\$

REGISTRATION IS NOT COMPLETE UNTIL WE HAVE RECEIVED:

- 1). Registration Contract 2). Emergency Cards 3). Full Payment**

Please return these forms along with FULL Payment to Sand Point LASER in the portables or LASER box in the school office. We don't offer scholarships or subsidies for these classes.

PARENT/GUARDIAN AUTHORIZATION

YOUR CHILD'S PARTICIPATION IN LASER IS CONDITIONED UPON YOUR COMPLETION AND SIGNING OF THIS AUTHORIZATION. PLEASE READ IT CAREFULLY AND RETURN IT TO SAND POINT LASER AFTER YOU SIGN IT.

Child's Name _____

Acknowledgment and Permission. I recognize that participation in LASER activities, programs and field trips and the use of LASER and school/playground facilities will involve potentially hazardous activities and strenuous exercise including, but not limited to, walking or driving to program or field trip destinations, running, jumping, swimming, and using equipment. I acknowledge that any or all of these types of activities could lead to serious injury and death. I hereby give my permission for my child to participate in all LASER activities and programs. I also give permission for my child to travel in vehicles operated by LASER staff, the Seattle Metro transit system, and/or private transportation companies under the supervision of LASER staff, employees, and other representatives.

Medical Treatment. I hereby give my permission for LASER staff members to give my child emergency treatment including, but not limited to, first aid and CPR. I also give permission for my child to be transported by ambulance, treated by aid car personnel, and/or transported to an emergency center for treatment. In the event I cannot be contacted, I further authorize and consent to the medical, surgical, and hospital care treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by a physician to safeguard my child's health. I waive my right of informed consent to such treatment.

_____ **INITIAL** **Publicity Permission:** By initialing this section, I hereby give my permission for my child's picture to be used, without consideration of any kind, in publications or displays produced by or on behalf of LASER and/or media coverage of LASER activities including those provided by vendors.

Waiver & Release of Liability. I acknowledge and assume all of the risks inherent in the activities described in this document and I hereby release and agree to hold harmless LASER, its agents, its vendors, employees, officers and directors from all claims for injury, death, property damage and expenses, including attorneys' fees, caused by or arising from my child's participation in LASER enrichment classes and the use of LASER and Sand Point Elementary School facilities.

I certify (or declare) that I am a parent or legal guardian of the above-named child and that I have authority to authorize the activities and actions, and to make the statements, waivers and releases, described above.

SIGNATURE OF PARENT/GUARDIAN

DATE SIGNED

REGISTRATION FORMS AND PAYMENTS ARE DUE ONE WEEK BEFORE SESSIONS BEGIN. REGISTRATION IS OPERATED ON A FIRST-COME-FIRST-SERVED BASIS. CHECKS SHOULD BE MADE PAYABLE TO LASER LEAPS. PLEASE RETURN FORMS AND PAYMENTS DIRECTLY TO SAND POINT LASER OR THE LASER MAIL BOX IN THE SCHOOL OFFICE. INCOMPLETE PAPER WORK AND/OR LATE PAYMENT WILL RESULT IN PLACEMENT ON OUR WAIT-LIST. LATE PICK UP OF CHILDREN AFTER CLASSES WILL RESULT IN A \$2 PER MINUTE ADDITIONAL LATE FEE. CHANGES AND CANCELLATIONS CAN BE MADE THROUGH THE FIRST WEEK OF CLASSES. NO REFUND WILL BE GIVEN FOR CANCELLATIONS AFTER THE FIRST WEEK OF CLASSES.