

Activity Registration Form

Cycle 1 – 8 One Hour Sessions

Begins February 1, 2015

|  |  |
| --- | --- |
| Student Name: |  |
| Grade: |  |
| Activity Name: |  |
| Day of this activity: |  |
| Time of this activity: |  |
| Fees : |  |
| Name of Parent/Guardian: |  |
| Parent Mobile Number: |  |

Dear Parent,

* After school activities do not provide transportation.
* Each cycle (8 one hour lessons) is 400AED
* The fees are not refundable.
* Student with medical issues (heart or asthma problems) should inform us.
* I allow my child to remain after school and participate in the above mentioned activities.
* I understand that I have to arrange my own transport for my child if he/she stays at school for an after school activity.
* ***Students with behavior problems or are not picked up on time may be asked to leave the club without refund of money***

I have read and understand all of the rules and guidelines

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature