



Sts. Constantine and Helen Cardiff-by-the-Sea Greek Language School (Adults) Registration Form 2018-2019

All students, new and returning, are required to complete this registration form before Greek School begins on Monday, September 24, 2018. Tuition is \$325.00 Note: Book fees are: \$TBD prior to class. Please pre-register by: September 13, 2018.

General Information:

Name: _____
First Name Last Name

Home Address: _____
Street/PO Box & Apt. # City State Zip

H Phone:() _____ Cell Phone:() _____ Other Phone:() _____

Email Address _____@_____

In case of an emergency, whom may we call?

Name: _____ Relationship: _____ Phone: _____

Do you have any allergies or require any medications? Yes _____ No _____ Please list: _____

New Student? ☐ Yes ☐ NO Last level completed in any Greek Language Program _____

On a scale of 1-5 please give us information regarding your Greek language abilities:

Speaking _____ Reading _____ Writing _____ Comprehension _____ Comfort _____

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Release Form – PLEASE READ CAREFULLY

I hereby grant Sts. Constantine and Helen Greek Orthodox Church the right to photograph me and use the photo and or other digital reproduction for publication processes; whether electronic, print, digital or electronic publishing via the Internet. This does include our school directory. Yes _____ No _____

Signature _____ Date _____

I agree to waive and release Saints Constantine and Helen Greek Language School (which includes its officers, teachers, employees and volunteers) from any claims, cause of action, damages, losses, liabilities or expenses for any personal injury, property damage or death arising out of my participation in any activities and events, regardless of whether personal injury, property damage or death was caused by Greek Language School personnel or otherwise. I understand that signing this waiver I am freeing the Greek Language School of Sts. Constantine and Helen Greek Orthodox Church (Cardiff-by-the-Sea, CA) from any liability resulting from child/children participation in the activities and events. I certify that I have personally read and understand the waiver.

Signature _____ Date _____

PLEASE DO NOT WRITE BELOW THIS LINE

Class Day & Time: _____ Tuition & Books Due: _____ Date Paid: _____
Check #/Transaction#: _____