

*Spring 2017 Registration Form for Language Clubs  
Sponsored by Stoneleigh Elementary School PTA*

**REGISTRATION is open between Wednesday, January 18<sup>th</sup> and Friday, January 27<sup>th</sup>, 2017 ONLY. We will NOT accept registration letters postmarked BEFORE January 18<sup>th</sup> or AFTER January 27<sup>th</sup> 2017.**

**Spanish** will meet on Wednesdays from 3:30-4:30 pm. (2/8-4/5)

**French and German club** will meet on Thursdays from 3:30-4:30 pm. (2/9-4/6)

Registration fee for club is \$120 per student.

**Please note that clubs will not offer snacks!**

Please contact Farida Malecki at [themaleckis@verizon.net](mailto:themaleckis@verizon.net) with any questions.

PLEASE PRINT NEATLY – Use a **separate form** for each student

Language club choice (please circle one) <b>FRENCH (grades 1-5)</b> <b>SPANISH (grades 2-5)</b> <b>SPANISH (grade K-1)</b> <b>GERMAN (grades 1-5)</b>	If student has previously attended a language club, please list language(s) and number of years of participation.
Student's Name:	Grade and Homeroom Teacher:
Parent/Guardian Name(s):	Home Phone:
Home Address:	Cell Phone:
Email Address ( <b>REQUIRED, please print neatly :</b> )	Work Phone:
Emergency Contact:	Emergency Contact Phone:
Authorized person(s) to pick up child after club:	Home & cell phones for authorized person(s) to pick up:
<input type="checkbox"/> Check here if your child will return to Play Centers after attending language club. <input type="checkbox"/> Check here if you need a scholarship and contact Ann Blanchard at <a href="mailto:anneblanchard96@gmail.com">anneblanchard96@gmail.com</a>	
Please list any food allergies:	
<p><b>General policies:</b> There are no refunds after February 15<sup>th</sup>, 2017 unless the program is cancelled. A formal behavior policy will be followed, and a child may be withdrawn without refund if inappropriate behavior is not corrected after warnings. Pick up promptly at 4:30 p.m. in Cafeteria Lobby.</p> <p>In case of injury or emergency, I give permission for an activity representative to call 911 and transport participant to a hospital.</p> <p>I shall inform the club sponsor, in writing, of any medical or health conditions.</p> <p>I have read the above and agree with the general policies of the program.</p> <p>Parent's signature: _____ Date: _____</p>	

Please **mail** completed registration form and check payable to **Stoneleigh PTA** to:

**Farida Malecki, 633 Sussex Road, Towson, MD 21286**

**All registrations must be mailed. Available spaces in clubs will be filled based on postmark of registration form.**