

# Handwriting Summer Camp at the Registration Form 1



Child's Name: \_\_\_\_\_  
DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
Grade Entering in September: \_\_\_\_\_ School: \_\_\_\_\_  
Handwriting Program Used: \_\_\_\_\_  
Parent/Guardian's Name: \_\_\_\_\_  
Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
Emergency Contact and Phone: \_\_\_\_\_  
Relationship to child: \_\_\_\_\_  
Physician Name and Number: \_\_\_\_\_  
Allergies: Yes? \_\_\_\_\_ No? \_\_\_\_\_  
If yes, please list: \_\_\_\_\_  
Medications: \_\_\_\_\_

Please mail completed forms to:

The Handwriting Highway  
Lorri Gardner  
5600 State Rt. 81  
Greenville, NY 12083

In the event of an injury to my child, I hereby grant permission to *The Handwriting Highway* to obtain any emergency medical treatment they deem necessary in the best interest of my child.

The information above is accurate and correct to the best of my knowledge. I understand that *The Handwriting Highway* accepts no responsibility for medical liability and that I will be billed for any and all medical expenses incurred.

A non-refundable fee of \$100.00 is required by July 19, 2010. This fee is non-transferable. I also agree to pay any additional fees that may result from a returned or invalid check.

Photo Release: I understand that as a participant, my child may be photographed and/or videotaped during classes and these photos/videos may be used in *The Handwriting Highway* promotional/marketing material and /or their website.

(please initial) Yes: \_\_\_\_\_ No: \_\_\_\_\_

I understand and acknowledge there are certain inherent risks in participating in classes and activities hosted by *The Handwriting Highway*. The Handwriting Highway shall not be held liable for any damage to personal items such as (but not limited to) clothing, shoes or other personal property caused by paint, glue and any other product used in the class.

I am aware that products used by *The Handwriting Highway* may be considered allergens or irritants to certain people including but not limited to: latex, paints, peanuts, dust particles, clay, playdoh, markers, shaving cream, and chalk. Parents/Guardians have the sole responsibility to inform *The Handwriting Highway* about allergies or medical conditions that would limit the child's participation.

I hereby release, agree to defend, indemnify and hold harmless, *The Handwriting Highway* from any claims, losses or expenses incurred or on behalf of my child, including any and all claims arising from *The Handwriting Highway's* own negligence.



\_\_\_\_\_  
Parent/Guardian (Print)

\_\_\_\_\_  
Parent/Guardian (Signature)

\_\_\_\_\_  
Date

Payment:  
Cash: \_\_\_\_\_  
Check: \_\_\_\_\_  
Number: \_\_\_\_\_