

SPRING 2015 REGISTRATION FORM

Juguemos a Cantar

info@juguemos.org - www.juguemos.org (917) 453-1187

ALL OUR CLASSES ARE IN SPANISH UNLESS NOTED

Revised 3.17.15

INFORMATION

CHILD'S FIRST NAME _____ LAST NAME: _____
 Returning Student: YES / NO Male / Female Age: _____ D.O.B. (mm/dd/yy) _____
 Child's grade (if applicable): _____ School (if applicable): _____
 Spanish Knowledge / Does anyone talk in Spanish to him/her? _____
 Address: _____ City: _____ State: _____ Zip: _____

PARENTS/ GUARDIAN INFORMATION:

First & Last Name: _____ Relationship to the child: _____
 Home Phone: _____ Cell: _____ Work: _____
 Email (**PRINT PLEASE- ALL communications are sent by email**): _____
 Emergency Contact & Phone: _____
 How did you learn about Juguemos? _____

PLEASE COMPLETE WITH CLASS INFORMATION:

	DAY	TIME	AGE	TYPE	LOCATION	TUITION	CREDIT CARD
1 st Choice							
2 nd Choice							

ENROLLMENT INFORMATION: Please read!

❖ Spring Activity Classes will start ON APRIL 13, 2015 AND will RUN for 10 weeks.

- ❖ PAYMENT SHOULD INCLUDE FULL TUITION, OTHERWISE YOUR CHILD WILL NOT BE REGISTERED and will be placed on a waiting list. Thank you for your cooperation and understanding!
- ❖ REGISTRATION CAN BE MADE BY MAIL, BY PHONE or through our WEBSITE. PAYMENT MUST BE RECEIVED AT THE TIME OF REGISTRATION. You will not receive any confirmation unless the group you chose is full. Feel free to email us at INFO@JUGUEMOS.ORG or leave a message at (917) 453-1187 any time.
- ❖ In case a class has to be canceled due to weather conditions, etc., a class will be added at the end of the cycle. There MUST be a minimum of 4 children to start a group (max 8). Send registration early! Groups with low enrollment will not open.
 SIBLING DISCOUNT: Only given to the sibling (must be 9 months or older, at time of registration) of registered child. DISCOUNT WILL APPLY to SIMILAR or LOWER TUITION classes. Does not apply to Afterschool. LOCATION: Please refer to SCHEDULE OF CLASSES to choose class and location.
- ❖ TRIAL DROP IN CLASS: If you want to DROP IN (\$30 per 45 minute class) please call or email IN ADVANCE (24 hours at least) to schedule (note that "drop in" is a class where your child attended, s/he was not registered and it was not a make up class - If you are in doubt, please call/email the office BEFORE attending the class since Parents are financially responsible for all the classes their children attend, whether they or the babysitter brings the child.- DURATION: Classes last 45 minutes unless specifically noted.
- ❖ MAKE UP POLICY: Only ONE make-ups class per semester. PAYMENT INFORMATION: Please see BACK of this form.
- ❖ No refunds 24 HOURS AFTER 1ST CLASS whether you assisted or not. - THERE IS A \$30 CLASS FEE FOR EVERY CLASS YOUR CHILD ATTENDS IF S/HE IS NOT ENROLLED IN THAT CLASS - NO DISCOUNTS FOR ABSENCES OF ANY KIND. WE WILL APPRECIATE IF YOU DO NOT ASK FOR REFUNDS, DISCOUNTS OR ADDITIONAL MAKE UPS. In case of serious medical condition that makes it impossible for a child to participate at all, a medical certificate must be presented stating such condition and it will be, at discretion of Juguemos, to give credit OR refund for future classes during the current school year if appropriate. Parents will be financially responsible for all the classes that the child attended. ABSOLUTELY NO CARRY OVER ON TO THE NEXT SESSION - Service Fee: \$20 for any returned check from the bank.

PAYMENT INFORMATION

You can register by MAIL, EMAIL, PHONE, and through our WEBSITE.

Make Checks Payable to: JUGUEMOS A CANTAR

MAIL: Send COMPLETE registration AND payment to our office at: **JUGUEMOS A CANTAR (357 Sixth Street- Brooklyn, NY 11215**

(The check will be returned OR refunded if the group you are applying for is full or not opening)

PHONE: Call (917) 453-1187 to complete form and process payment.

EMAIL: Scan and email (info@juguemos.org) your complete registration form with payment information.

CASH: Please give us a call or email us to set up an appointment. **WEBSITE:** www.juguemos.org

CREDIT CARD PAYMENT: Complete below-

Credit Card #: _____ Exp. Date _____ Sec Code _____
Cardholder Name (print): _____ Signature _____ Date: _____
Zip Code: _____ Phone number: _____ Amount to be charged: _____

PLEASE COMPLETE AND SIGN:

I, _____ am the parent/guardian of _____. I certify that my child has no known medical or other conditions that could interfere with his/her participation in Juguemos a Cantar activities. I hereby release, discharge and hold harmless Juguemos a Cantar, and any of its instructors, teachers or staff, from any claims and all claims whatsoever, including but not limited to any claim of negligence or gross negligence that could otherwise be asserted arising out of or relating to any injuries physical or emotional that may result to my child while participating in any Juguemos a Cantar activity, or as a result of such activities. I understand that in case of emergency, I will be contacted or they will contact the emergency number that I provided. I understand that my child will be taken to the ER of the nearest Hospital in case of emergency and I will be responsible for any and all payments subsequent as well as any and all follow ups that medical staff deems necessary. **PHOTOS:** I understand that for its promotional activities, Juguemos a Cantar may utilize photographs of the participating children and its parents or caregivers (without their names) while engaged in our classes. By signing below I consent to such use and waive all rights to compensation. I grant permission for my child to watch G-rated movies and educational children's videos. If Juguemos finds it necessary to withdraw my child from the Program, I will be responsible for payment for the number of days and/or weeks s/he attended prior to the withdrawal date. **BEHAVIOR:** Juguemos seeks to uphold the Community Standards established as the code of conduct at Juguemos. Juguemos staff is responsible for providing a positive experience for my child; however, if s/he cannot live within the Juguemos Community, or if his behavior adversely affects the experiences of other children, I understand that s/he may be dismissed from the Program. I have discussed the policies of the Program with my child, and my child understands that a consequence of his unacceptable behavior could be dismissal from the Program. I have discussed in detail with my child my expectations and have stated that we, as parent/guardian and Juguemos staff, are in agreement with respect to the consequences for failure to uphold the Juguemos Community Standards. **TEACHERS:** I understand that Juguemos reserves the right to substitute a teacher or instructor. I represent that the information I have provided on this Registration Form is true and accurate and further represent that I have read and understand this brochure, and agree to its terms.

BY SIGNING AND DATING BELOW, I ACKNOWLEDGE I HAVE READ AND I ACCEPT ALL ENROLLMENT AND REFUNDS CONDITIONS.

Full Name

Relationship

Date

Signature of parent or guardian

JUGUEMOS A CANTAR PROGRAMS INCLUDE:

- PRE-SCHOOL
- AFTERSCHOOL (Pick up)
- SUMMER CAMP
- HOLIDAY MINI CAMPS
- DROP-INS & DROP-OFF