REGISTRATION FORM -- BSS "SV. SV. KIRIL I METODII"

READ CAREFULLY, FILL IN, SIGN AND RETURN BEFORE THE FIRST CLASS

Student full name:i	n English	/	на български	
Student place of birth: city, county, co	ountry			
Student date of birth: dd /month in k	etters/ year	EGN:		
Primary Contact:full name	Cell phone:		Email:	
Secondary Contact* full name	Cell phone*:		Email*:	
Address: Street number and name,	Apt. number, town/	city, state,	zip code	
Emergency Contact: full name, rela	tionship to student	Emergence	cy Phone:	
Allergies/Limitations (if none, write "none")				
Primary Language spoken at home:		_ Secondary lan	guage:	
Notes for Course Instructor				
I give permission my Primary contact information to be included in a school directory, which will be distributed only among				
parents: Mailing Address, Cell phone, Email Address (check all that apply)				

* Denotes optional information

PARENTAL RELEASE FROM LIABILITY AND INDEMNIFICATION AGREEMENT

I, the undersigned parent or guardian of the above identified minor, do hereby consent to his/her participation in the program and activities provided by the Bulgarian Sunday School "Sv. Sv. Kiril i Metodii" (hereinafter "the School") and do forever release, acquit, discharge and agree not to sue the School and its successors, departments, officers, employees and agents from and on account of any and all claims, actions, causes of action, loss of service, demands and/or damages which I/we may now or hereafter have as the parent or guardian of said minor resulting, directly or indirectly, from said minor's participation in the School's program and activities. I also release, acquit, discharge and agree not to sue the School and its successors, departments, officers, employees and agents from and on account of any and all claims, actions, causes of action, demands and/or damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority, resulting or to result, directly or indirectly, from his/her participation in the School's program and activities. FURTHERMORE, I hereby agree to protect the School and its successors, departments, officers, employees and agents against any claim for loss, damages, compensation or otherwise brought by or on behalf of said minor resulting, directly or indirectly, from said minor's participation in the School's program and activities, and to indemnify, reimburse, defend or make good to the School and its successors, departments, officers, employees and agents any loss or damage or costs, including attorney's fees, the School or its representatives, may have to pay if any litigation arises from said minor's participation in the course named above. In the event that my child becomes ill or sustains injury while in care of the School, I give permission to administer first aid to him/her. I also give permission to admit my child in any hospital for such treatment as deemed necessary.

Signature: _____ Relationship:_____ Date: _____

IMPORTANT

Failure to complete and return this form to the course instructor may result in the ineligibility of your child to participate in the School's program until the form is completed and received by the School's Administrator. No refunds will be given for any missed classes in this case. Thank you for your cooperation in our efforts to keep your children safe.

CONSENT FOR USE OF IMAGES

I hereby grant permission to the School to use images and videos of my child while on School premises or participating in School activities to be used for the purposes of the School, such as but not limited to, the School's website, vearbooks, and brochures. No child will be identified by name in any materials.

Signature: Date:

DROP OFF / PICK UP POLICY

All children must be dropped off by an adult. It is the responsibility of parents/guardians to make sure their children get to class and are met by an instructor. If you are unable to escort your children to class or meet them after class in front of the classroom, you must make arrangements for another adult to do so and inform the class instructor. The parent/guardian is responsible for ensuring the arrangements are carried out.

I have read, understand and accept the policies outlined above.

Signature: ____

_____ Date: _____