#### Clarksville Elementary School PTA Fall 2018

### After School Program

## The Wizarding World of Harry Potter





Are you obsessed with the world of Harry Potter? Do you wish you had Harry's powers or Hermione's spells? Would you like to make your own magic wand, Firebolt flying broom, and golden snitch? Do you know how to play Quidditch? If you want to enter the Wizarding World of Harry Potter, make sure you sign up soon before Voldemort finds you! Hogwarts has limited enrollment...

Teacher: Mr. Weiskind

Brought to you by the CES PTA and The Enrichment Zone, LLC Registration is **LIMITED** to a first come, first serve basis.

## Important Information:

When: 7 sessions -Wednesdays from 4:05-5:00: 10/10, 10/17, 10/24, 10/31, 11/14, 11/28, 12/5

Who: Grades 2-5
Why: To have fun!

**Cost**: \$150

Deadline: 4 pm - Monday, October 1st, 2018

<u>Parent Volunteer is needed for the class to take place</u>
\*\* free tuition for one child of volunteer for all 7 sessions

\*\*\*Keep this half for your records\*\*\*

#### REGISTRATION/PERMISSION FORM

- Please complete a separate registration form for each child.
- We must have: EMAIL address & EMERGENCY name and phone number
- Payment Policy: Please make checks payable to CES PTA
- Return form & payment in an envelope marked "Harry Potter" to your child's teacher or the PTA mailbox by 4 pm - Monday, October 1<sup>st</sup>

# PLEASE PRINT CLEARLY. PARENTS & STUDENTS: PLEASE SIGN REGISTRATION FORM ON BOTTOM LINES.

Student's Name	Teacher & Grade	
Home Phone	Cell Phone	
Work Phone	Email address	
Name(s) of pick-up person(s):		
EMERGENCY CONTACT NAME:		<del> </del>
EMERGENCY CONTACT PHONE #:		
Allergies/Information the Instructor sho	ould know - <u>please write o</u>	n back
(Instructions/Medicine must be provided	d to Mr. Weiskind in orde	zr to
participate.)		
Program: The Wizarding World of Harry Potter	Wednesdays 4:05-5:00	Fee: \$150
that the PTA is not the provider of this class, but hand coordinated the registration. The instructors a employees or agents of the PTA. I understand and corogram may carry a risk of injury. I agree that no shall be available from the PTA or its agents, the Eand I shall be responsible for all medical expenses reasonable precautions will be taken to assure my classifications will not hold the instructor(s), the Enrichment Zomembers, or the CES or staff liable for any acciden	re independent contractors and a agree that any physical activities coverage or reimbursement for m nrichment Zone, LLC or its agents relating to participation in this pr hild's safety and prevent injuries ne, LLC, the CES PTA and its offi	ire not the involved in this nedical expenses and instructors, ogram. While all from occurring,
My child and I understand and agree that, after on appropriate behavior in the class, or is not picked unattend the remaining classes scheduled for that prowarning and before the child is removed from class removed for these reasons. There is a late fee of \$ nor partial refunds will be issued if a parent cancels understood, and agree to these guidelines of the CE *A student may not attend a class on a day where	p promptly after the class, will no ogram. Parents will be notified at Refunds will not be issued for an 10 per 5 minutes for tardy pickul s registration later than 10/01/18 5 After School Programs.	ot be allowed to the time of the ny student ps. Neither full 3. I have read,
Parent Name (Please print clearly)		
Parent (Signature)		