

E.A.S.E

Fall 2016 Session

Expressional Art (K-5th) Tuesday 5 week session: 9/13-10/18 *no class 10/11
Instructor: Kathryn Budd Tuition \$45.00 Class Time 3:00-4:15

Improv Class (3-5th) Tuesday 5 week session 9/13-10/18 *no class 10/11
Instructor: Sherri Jones Tuition \$45.00 *CLASS TIME 3:00-5:00*****

Yoga for Kids (K-2nd) Thursday 5 week session: 9/15-10/13
Yoga for Kids (3-5th) Wednesday 5 week session: 9/14-10/12
Instructor: Heidi Liecker Tuition \$45.00 Class Time 3:00-4:15

Renaissance Knights Chess (K-5th) Friday 9 week session 9/16-11/18
Instructor: Coach Francisco Tuition \$90.00 Class Time 3:00-4:15

CLASSES ARE FROM 3:00-4:15, UNLESS NOTED. STUDENTS NOT PICKED UP ON TIME WILL NOT BE ABLE TO CONTINUE WITH THE PROGRAM.

You may send a healthy snack for your student during club time.

******Payment and Registration DUE by Sept 9th******

Students will go directly to the classroom after school and then be released at the Emerson doors on Clinton Ave, by the flag pole.

Please read this form carefully and be aware that in signing up and participating in this program(s), you will be waiving and releasing all claims for injuries you might sustain arising out of this program. As a participant in the program(s), I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of injuries, damages or loss which I may sustain as a result of participating in any and all activities with or associated with such program(s). I agree to waive and relinquish all claims I may have as a result of participating in the program(s) against District 100 and its officers, agents, servants, and employees. I do hereby release and discharge the District 100 and its officers, agents, servants, and employees from any and all claims from injuries, damage or loss which I may have or which may accrue to me on account of my participation in the program(s). I further agree to indemnify and hold harmless and defend District 100 and its officers, agents, servants, and employees from any and all claims resulting from injuries, damages and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program(s). I have read and fully understand the above Program Details and Waiver Release of all Claims. Waivers MUST be signed by participant(s)' legal guardian.

Parent or guardian signature: _____ Date: _____

Classes are on a first-come, first-served basis. Space is limited and classes fill up quickly. Registration will not be accepted after classes have begun. Students must exhibit exemplary behavior to participate in an EASE class, or may be asked to leave the class without financial reimbursement.

Please place registration form and payment in an envelope and address to Emerson EASE Program. Checks should be made out to EMERSON PTA. If you have any questions, please contact: emersonpta100@yahoo.com

STUDENT NAME _____ GRADE _____

PARENT/GUARDIAN _____ EMAIL _____

CONTACT # _____

EMERGENCY CONTACT _____ PHONE _____

ALLERGIES OR MEDICAL INFORMATION THE INSTRUCTOR SHOULD KNOW

MY CHILD (PLEASE CIRCLE) PICKED UP/ WALKS/ YMCA AFTERCARE

Expressional Art (K-5) Tuesday	\$45.00	\$ _____	
Yoga (3-5) Wednesday	\$45.00	\$ _____	
Yoga (K-2) Thursday	\$45.00	\$ _____	
Improve Class (3-5) Tuesday	\$45.00	\$ _____	class time 3-5pm
Chess (K-5) Friday 10 wk	\$90.00	\$ _____	
Donation to Support EASE Scholarships		\$ _____	
Total Due		\$ _____	