

# Registration Form for World Languages Mini Sessions

Child's name \_\_\_\_\_

Teacher/Room \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

(Email address will be used for class updates and communications.)

Emergency contact name & phone \_\_\_\_\_

Is there anything that your instructor should know about your child (health/food allergy concerns, learning styles, etc.)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please register my child for the following class (check one):

- |                                     |                                   |
|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Italian I  | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Italian II | <input type="checkbox"/> German   |
|                                     | <input type="checkbox"/> Chinese  |

**Tuition check (see class information for amount) should be made out to Laurelhurst PTA and submitted with this registration form to the school office.**

Please check any or all of the following boxes, as they apply to you:

- I would like to share my email address and/or telephone number with other parents in my child's language class (in the form of a class list, for purposes of carpooling, sharing classroom info, etc.)
- I would be willing to volunteer as a language class coordinator (responsible for helping the teacher disseminate information to parents).
- I give permission for Laurelhurst school to use my child's photo and image for in-school promotional materials (e.g., photo display and video during school tours) for the World Languages program.

**Parent/Guardian Signature**

\_\_\_\_\_

**Date** \_\_\_\_\_