

FRENCH FOR FUN

STUDENT PROFILE

Student Name _____
Parent Name _____

EMERGENCY INFORMATION

Contact: Name _____ Phone _____
Relationship _____
Special Medical Attention _____

PICK UP INFORMATION

Student will be picked-up at the Center by:
(Name of person(s) allowed to pick-up student)

Name _____ Relationship _____
Name _____ Relationship _____

COMMENTS - SPECIAL NEEDS

Waiver of Liability

I agree to assume the risk of accident or injury sustained from whatever cause during activities at French For Fun and release French For Fun and it's personnel for any accident or injury.

Parent Signature _____ Date _____