

Japanese Play Group Registration Form Ages 6 – 24 months

Tuesdays 9.00 – 9.45am

Session One : 16, 23, 30 August, 6, 13 September
Session Two : 20, 27 September, 4, 11, 18 October (note the break)
Session Three : 1, 8, 15, 20, 29 November

Name of Child First Family

Name Generally Used

Date of Birth Age Male / Female

Name of Parent / Guardian First Family

Address

Telephone Home Cell

Email Address

Please check all those which apply

..... Session One Session Two Session Three

I agree to pay \$30 per Session checked above on or before the first date of the Session. I understand that a place in the Play Group is not guaranteed until payment in full has been received by IST and its receipt acknowledged by email. I agree to pay an additional \$35 for any payment which is returned by my bank unpaid for any reason. I understand and agree that IST is a school of limited enrolment and the expenses of the school do not diminish with the departure of some students, and that should I wish to withdraw my child(ren) from the Play Group or to miss a particular Play Group meeting I will not be entitled to any refund or Fee abatement. I further understand and agree that IST reserves the right to dismiss, suspend, expel my child(ren) if and when it is determined that the School cannot meet the needs of my child(ren), or should the terms of this Agreement be violated, or all fees not paid as agreed. I further agree that I will assume full responsibility of any losses or damages resulting from the actions of my child(ren), financial or otherwise, and that as my child(ren) can attend only in my presence and under my direct control I absolve IST from any responsibility and from any claims, from me, my representatives or heirs, now and in perpetuity, of any type arising from our participation in a Play Group and/or our presence on the IST campus.

The execution of this binding contract certifies that I have read and understand the foregoing and agree to the terms of this Agreement and I have retained a copy.

..... I herewith append a cheque made payable to the "International School of Tucson" for \$

.....
Signature

.....
Name

.....
Date

Please return this form with your cheque to :

International School of Tucson 1730 North First Avenue Tucson AZ 85719