

FAMILY/STUDENT APPLICATION & RELEASE FORM 2012-2013

Part II of the registration process. Please print, complete, sign and MAIL this form.

(Use ONE form Per Family)

(PLEASE PRINT)

Parent's Name _____, _____
Last First

Address _____ City _____ Zip _____

E-Mail _____

Phone _____ Cell Phone _____

Emergency Contact Name _____ Phone _____

Student's Name _____

2012-2013 Grade _____ Birth Date _____

Does this student have any medical conditions or allergies? Yes / No _____

Student's Name _____

2012-2013 Grade _____ Birth Date _____

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Student's Name _____

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Does this student have any medical conditions or allergies? Yes / No _____

Student's Name _____

2012-2013 Grade _____ Birth Date _____

Does this student have any medical conditions or allergies? Yes / No _____

Release:

All classes and activities for HEED are planned and organized by volunteers. Each participant must assume the risk of physical injury that could result from any of these activities and classes. Consequently, I release Center Point Church, its employees and all HEED volunteers and Teachers from all liability for any injury to myself, my family or dependents as a result of participating in HEED classes.

My Student(s) and I have read the HEED Handbook and the HEED Code of Conduct.
We understand and agree to abide by such code.

Parent Name _____ Parent Signature _____

Student/Family Application **Form** and **Fee** is due by April 23, 2012. Please make check payable to HEED and mail this completed form along with your payment to:

Kim Mathews
1274 Mathews Street
Naples, FL 34117

Non-refundable Application fee - 25.00 per student or 45.00 per family \$ _____ Cash \$ _____ Check# _____

OPTIONAL: I have included \$ _____ toward a scholarship donation.

Thank You!