

Spanish Registration

Spanish @ Your Door

School Name: Lake Dow Children's Academy

Student Name: _____

Birthday: _____ Age: _____

Classroom: _____

Parent/Guardian Name: _____

Address: _____

City: _____ Zipcode: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Any illness or special conditions that our staff should be aware of? _____

Waiver and Release Form

Vamos a jugar! The earlier your child is introduced to a second language the greater the chances are that he/she will master both languages. Our curriculum for this age is very dynamic and incorporates different teaching methods. Our activities include energizing games, music, puppets, nature walks, outdoor activities and more.

The student named above has my full consent to participate in any Spanish @ Your Door program. I also give consent for Spanish @ Your Door to use my child's class participation photo for any promotional, marketing or advertisement use but not limited to brochures, website, posters, business cards, etc.

Parent/Guardian Signature

Date