MASTER REGISTRATION FORM



TYPA Family ID Number

Parent 1 Full Nam			Parent 2 Full Name	
Mobile Phone #			Mobile Phone #	
Company Name			Company Name	
Company Phone #			Company Phone #	
E-mail			E-mail	
Home Phone #	ł	Home Address		

Alternative Contact Person (Primary)		Phone #	
Alternative Contact Person (Secondary)		Phone #	

Preferred Name (Optional)	First Name	Last Name	Birthday MM/DD/YY	Grade	School	Nationality	Gender (M/F)	MH*
								Yes/No
								Yes/No
								Yes/No
								Yes/No
								Yes/No
MH*: Medical History includes special conditions such as allergies and other medical issues we should be aware of. If "Yes", a Medical								

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ENROLLMENT CONTRACT AND POLICIES

- 1. Due to legal requirements, participation in TYPA activities is strictly limited to those holding foreign passports. Each participant pays a registration fee per semester.
- TYPA carries liability insurance for all participants only on the TAS and Tiger Tots Place campuses where TYPA activities are held. TYPA does **NOT** carry personal medical and accident insurance which is deemed to be a personal family responsibility.
- 3. In case of accident, parents will be notified immediately using the contact information on file in the TYPA office and hereby grant permission to have the participant taken to the TAS nurse's office, Veteran's General Hospital or another nearby accredited hospital or clinic for emergency treatment.
- 4. Recognizing that despite the best efforts of TYPA to ensure the safety of the above named members, accidents may occur and the participants may need first aid or medical treatment, including the services of the TAS nursing staff, we the undersigned do hereby waive, and agree to waive, any and all claims we may have against TYPA, TAS, their officers, employees, directors and representatives arising from, or in connection with, any TYPA activity and any injury and/or treatment therefrom.
- 5. We hereby authorize and give full consent, without limitations or reservations, for TYPA to publish, in whole or in part, any photographs, videos, written extractions, and voice recordings in which our child appears in TYPA publications, including but not limited to newsletters, advertising, brochures, press releases, and TYPA website or web pages. We also

authorize TYPA to share personal details (e.g. name, email, phone numbers) with other parents for TYPA related activities.

6. We agree that our child's opportunity to attend the TYPA activities is contingent at all times upon the child and all other members of our family honoring the standards for civility, courtesy, and respect toward other students, faculty, and staff as embodied in TYPA's values of honesty, respect, responsibility, kindness and courage. In all cases this will be determined by TYPA in its sole discretion.

FORCE MAJEURE

Please be aware that TYPA may be ordered to temporarily or permanently close or alter its operations, or may decide to, as a result of a Force Majeure event.

Force Majeure, is any event beyond the reasonable control of TYPA including but not limited to natural disaster, accident, war, civil unrest, outbreak of disease, and compliance with law or government order.

TYPA shall make reasonable efforts to provide recreational / educational services and activities during the Force Majeure event, but TYPA has no liability arising therefrom. TYPA will have no obligation to pay tuition, fees or issue credits in the event of any Force Majeure event.

AGREEMENT

 ${\sf I}$ / We understand and agree that the foregoing represents our entire agreement with TYPA. A parent of the student must sign this Contract. All obligations of the parents, if there is more than one parent, shall be joint and several in nature.

I hereby acknowledge that I have read and understood the above TYPA Program policies and I agree to all terms and conditions.

PARENT 1 SIGNATURE / DATE

PARENT 2 SIGNATURE / DATE