

**SSDS FALL ENRICHMENT 2011**  
**SIGN UP SHEET (ONE PER CHILD)**

**PLEASE RETURN THE FOLLOWING  
TWO SHEETS TO SSDS FOR ENROLLMENT BY  
MONDAY, AUGUST 8, 2011**

**Student Name:** \_\_\_\_\_

**Student Grade 2011-2012:** \_\_\_\_\_

<b>Activity and Grades</b>	<b>Day</b>	<b># sessions</b>	<b>Cost</b>	<b>Check here if your child will participate in this activity and complete and sign the liability waiver on the back of this sheet. (Please initial next to each vendor).</b>
Chess	Monday	16	\$210	
Jump-Rope Club	Monday	10	\$110	
Monday Homework Club	Monday	17	\$180	
Sports	Tuesday	18	\$205	
Tuesday Homework Club	Tuesday	18	\$190	
Math Enrichment	Wednesday	13	\$205	
Abacadabra	Thursday	12	\$130	
Fencing	Thursday	11	\$160	
Thursday Homework Club	Thursday	12	\$130	
Art and More	Friday	11	\$131	
Friday Homework Club	Friday	11	\$120	

- 1. Calculate your total and include your check for the correct total amount payable to SSDS.**
- 2. Complete the liability waiver (on the back of this sheet). The waiver is the contact information form that is provided to each vendor.**
- 3. Return these two forms and your check to the school office by MONDAY, AUGUST 8, 2011.**

**OVER**

# Liability Waiver

The participant below is in good health and has my permission to participate in the enrichment programs initialed below. In case of emergency I grant permission for my child to be given emergency treatment. I agree to assume complete financial responsibility for any injury or property damage created as a result of an intentional or negligent act of my child or ward while she or he is enrolled in this activity. I agree to indemnify and hold harmless the activity vendor, Solomon Schechter Day School, instructors, coaches, members, guests and other participants, (and in the case of fencing, the US Fencing Association), from all claims, liability, demands or actions for personal injury, damage or loss. This agreement shall be binding on my personal representatives, heirs and assigns.

Child: \_\_\_\_\_  
\_\_\_\_\_

D.O.B. \_\_\_\_\_ Gender: M F Grade: \_\_\_\_\_  
\_\_\_\_\_

Parent's Name: \_\_\_\_\_  
\_\_\_\_\_

Complete Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_  
\_\_\_\_\_

Relevant Medical Information: \_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_  
\_\_\_\_\_

Activity and Grades	Day	# sessions	Initial next to each activity to indicate your permission for participation and your liability waiver
Chess	Monday	16	
Jump-Rope Club	Monday	10	
Monday Homework Club	Monday	17	
Sports	Tuesday	18	
Tuesday Homework Club	Tuesday	18	
Math Enrichment	Wednesday	13	
Abracadabra	Thursday	12	
Fencing	Thursday	11	
Thursday Homework Club	Thursday	12	
Art and More	Friday	11	

Friday Homework Club	Friday	11	
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