

Registration Form

Student Name: _____

Address: _____

Phone and Emergency Contact info: _____

Email address (very important, please print legibly): _____

Class Number and Name	Session (Fall, Winter or Spring)	Fee:

Add One Time Registration Fee for all activities EXCEPT Homework Club : _____ \$5.00

Tax Deductible Donation for Scholarships: _____

TOTAL: _____

Please make checks out to Westland PTA!

Cancellations: Sometimes outdoor classes are cancelled due to weather conditions. Students must listen to the announcements and have back-up plan for that afternoon. Sometimes we must cancel vendor-led classes due to lack of enrollment. You will be notified and your money your money refunded.

Refund Policy: In order to obtain a refund, parents must email mreingruber@verizon.net or call Missy at 301-652-6365 no later than **9/12** for the fall session, **1/9** for the winter session, and **4/3** for the spring session.

(No registration or fee required for ESOL Help, Writing and Research Support, Math Support, English/Humanities Support or Media Center Support.)

**** Scholarship Funds Are Available. Please Contact Guidance Counselor Jessica Nachman at jessica_r_nachman@mcpsmd.org, 301-320-6515**

Please keep a copy for your records.

Class Number and Name	Session (Fall, Winter or Spring)	Fee
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After School Activities Waiver

** This form must be signed by a parent/guardian before a student can attend any club associated with the Westland PTA's After School Activity Program (ASAP).

The parent or guardian of participant _____ assumes on behalf of themselves and all heirs and assignees all risks associated with participation in the ASAP. The members of the ASAP Committee, Westland Middle School staff, the Westland PTA and/or the County assume no liability for injury or damages arising from participation in the program. Many activities involve inherent risks of death or serious bodily injury to the eye, head or other sensitive parts of the body. Participants expressly assume the responsibility for obtaining and correctly using appropriate protective gear for all activities. Such protective gear may include eye protection, mouthpieces, helmets or other equipment designed to mitigate the risk of injury inherent to a particular activity. The participant consents to emergency treatment if deemed necessary. Neither the club instructor, the Westland PTA, Westland Middle School and/or members of the ASAP Committee are responsible for the students once they have departed the school property after the scheduled activity whether they are walking or being transported by automobile. Due to the strenuous nature of some activities, each participant is encouraged to consult his or her physician concerning fitness to participate in the program. The participant also consents to Westland Middle School's use of any photographs taken or video made of the program.

Parent/Guardian Signature

Print Name

Date