



GATE LANGUAGES

INSTRUCTION • TRANSLATION • CONSULTING

Registration Form

After School SPANISH Program-HAWES ELEMENTARY SCHOOL

We are a language school whose mission is teaching languages in a fun and effective manner. Our Enrichment language program is linked with cultural activity for Kinder thru 5th Grade students. This is a unique opportunity for your children to learn a second or third language. Our language program aims at their learning through visuals, songs, and activities with music, puppets, big books, posters, picture cards, theater and **sign language**. Instructors are trained in child development and our classes emphasize oral communication from the start and parents can expect to see results from the first day of classes. Don't miss out! **GATE LANGUAGES AFTER SCHOOL SPANISH PROGRAM IS A PTA SPONSORED PROGRAM. SPACE LIMITED!**

CONTINUING YEAR-LONG PROGRAM. Classes: TUESDAYS. Room: Portable 39

1st session: 10-20-15 to 03-01-16 (16 one hour weekly classes at \$ 12.00 per class)

2nd session: 03-08-16 to 06-14-16 (14 one hour weekly classes at \$ 12.00 per class)

No classes: 10.27.15/ 11.24.15/ 12.22.15/ 12.29.15/ 03.29.16

K^{inder} to 3rd Grade: (2:30 pm-3:30 pm) Room: Portable 39

4th to 5th Grade : (2:50 pm- 3:50 pm). Room: Portable 39

1st session: \$ 12.00x16 classes= **\$192.00+material: \$ 25.00. TOTAL: \$ 217.00** due on or before 10-20-15

2nd session:\$ 12.00x14 classes= **\$168.00+material: \$ 25.00.TOTAL: \$ 193.00** due on or before 03-08-16

Minimum 10 students-Class size is limited. Fees must be received with the application to guarantee enrollment. No make-up classes. No refund will be given after the session starts.

Name: _____ Age: _____ Teacher: _____ Grade: _____

Parent Name: _____ Email: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Parent or Other Name: _____ will pick up _____ -Go to extended _____

Photo Release: I, _____, parent of _____, hereby grant my irrevocable right and permission with respect to photographs, videos, motion pictures, And/ or sound recordings being taken during any of the classes, workshops, camps, programs, activities and/or events in publications, the company website, and/or any other form of media. Names of the children will not accompany any of the photos that are used. Release of Liability: In consideration of your accepting this registration, I hereby agree to release , indemnify and hold harmless Gate Languages , its officers, agents, contractors volunteers or employees from any liability, claim, or action for damages in any way arising out of, relating to, or resulting from my child's participation in this school's activities, classes and/ or camps.

Signature of

Parent/Guardian: _____ Date: _____

Registration online at www.gatelanguages.com/afterschool.html (Please bring the completed form on the first day of class) OR in person in portable 39, the first day of each session 10.20.15 (1st session) and on 03.08.16 (2nd session) . **Please make checks payable to Gate Languages.** Please contact us by email if you are interested in enrolling your child in other languages.



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