





Mark Twain Elementary PTSA—After School Foreign Language Program Instructors Provided by Seattle Languages International

Registration Form – FALL 2010 Session **FIRST GRADE to FIFTH GRADE**

Student's Name (Last)	(First)	Grade
Parent Name(s)		
Address	Email	
Daytime Phone: #	Evening/Other Phone#	

To register, enter in the table below a number indicating preference. "1" means first preference, "2" means 2nd. Secondary preferences will only be used if there are fewer than 8 or more than 10 students registered for your first preference.

Class	Day	Time	Class Preference
Spanish	Tuesday	3:15 — 4:15	
French	Tuesday	3:15 — 4:15	

Notes:

- To enroll, complete and return this form, attaching a check payable to "Mark Twain Elementary PTSA" for \$108 which covers the <u>8 weeks</u> FALL Session tuition. Classes will be scheduled to begin on Sep. 21st, Sept 28th, Oct 5th, Oct 12th, Oct 19th, Oct 26th, Nov 2nd, Nov 9th depending on teacher availability and enrollment levels. Checks returned for NSF subject to \$20.00 fee. LAST DAY TO REGISTER SEP-TEMBER 15TH.
- Classes will be filled in the order the <u>completed</u> forms with tuition checks are received at Mark Twain office. Classes will be cancelled if enrollment is below 8 students. 10 students maximum per class.
- A discount will be offered if a parent volunteers to chaperone 4 classes during a session. Contact Florence Canel email: florence_canel@hotmail.com for details and to sign up and if you have any questions .

I understand there is no supervision provided before or after the language classes and that I must pick up my child on time. I understand that no refunds can be given for withdrawals notified after September15th. I understand that this after-school program relies on PTSA volunteers to oversee the classes each week, and help with student sign-ins and sign-outs. I also understand that classes may be cancelled if no volunteers show up, and a refund cannot be issued in such a case.

Students and parents are expected to show respect to classmates, instructors, classrooms and property at all times. Failure to do so may result in student's dismissal.

Parent/Guardian Signature ____

__ Date ____

One PTSA Parent Volunteer is required per class. Be prepared to chaperone one class per session. A sign up sheet will be available at the class. Send your child with an after school snack that they can enjoy in the classroom before the class begins. Please arrange transportation for your child after the class.



□I understand that in order for my child(ren) to participate in the after school foreign language program, I must be a PTSA member with a current background check. I agree to chaperone one language class per session. This applies to other family members such as grandparents, aunts, uncles or siblings over 18 years, etc.

