

A Touch of Class **REVISED**

Forms may be sent into school or mailed to PJPII Attn Terry Altschuler, 2875 Manor Road, West Brandywine, PA 19320

Name of Participant: _____

Address: _____ City: _____ State _____ Zip: _____

Email _____

(Must provide as much of the communication is done through email)

H Phone: _____ W-Phone: _____ Cell Phone: _____

Emergency Contact: _____ Emergency Phone: _____

Medical Concerns _____

I hereby release and discharge Pope John Paul II Regional Catholic Elementary School ("JPII"), its, employees, staff members and administration from any claims, responsibilities or liabilities for injuries or harm incurred as a result of my participation at JPII. I authorize JPII, its employees, staff members and administration to take whatever action necessary, in their best judgment, in an emergency and I hereby release and discharge JPII from any responsibility or liability related thereto.

Signature: _____

*** Registration will not be accepted without a properly signed waiver ***

For more information, please contact Terry Altschuler * 610-384-5961 ext. 5410 email pjp2fac@aol.com

SCHEDULE / PAYMENT INFORMATION

Please check all classes attending:

Sunday - Men's Basketball League 7:00-9:00 pm - 11 weeks March 14- May 23 2010 - \$65 _____
(drop ins welcome \$5 per night **MUST** sign waiver)

Tuesday - Cooking Like the Pros - 6:30-8:30 pm- (Enter back of the building) 6 weeks March 9- April 6, 2010 - \$75 _____
12 people maximum so sign up early.

Tuesday - Intro to Spanish - 7-8 pm 8 Weeks March 9 -April 27, 2010 \$60 _____

Wednesday - Yoga 6:45- 7:45 pm 11 weeks, March 10 - May 19, 2010 \$110 _____

Thursday - Italian Language and Culture - 7:00-8:00 pm 8 weeks, March 11- April 29, 2010 \$60 _____

Zumba Exercise Class - 7:00-8:00 pm - 11 weeks, March 11 - May 27, 2010 (no class May 6) \$110 _____

Make checks payable to PJPI. Refund policy: Withdraw from class with less than 1 week noticed results in a \$15 administration fee.

Amount enclosed \$ _____

____ Cash _____ Check # _____ Credit Card # _____ Security code _____

Exp. Date: _____ Print Name on card: _____



Signature of cardholder: _____

If school is closed due to bad weather, classes will be canceled and rescheduled

