

Registration form		Children Programs 2010 - 2011					
Student Family name			Student First name				
Address						Apt/unit	
City	Postal code	Child's age	Birth date	year	mo.	day	Sex F <input type="checkbox"/> M <input type="checkbox"/>
Name of parent or guardian			phone				
Parent's E-mail			H()				
			C()				
			W()				
Alternate contact when you are not available			Phone ()				
Please provide information on your child which may be helpful to staff (allergies, medications, ...)							
Name of your child's school						Grade	
Program (please specify for how long) Core French <input type="checkbox"/> French immersion <input type="checkbox"/> Extended French <input type="checkbox"/> Foryear(s)							
Beginning of the courses / ... / 2010			End of the courses / ... / 2010				

Program	Session	Period	Day(s)	Program hours	Fees
1. Homework help	3 Sessions	Sep – Jan & Mar	Tues & Thur	4:15 to 5:45 pm	420 / Term
2. Wednesday classes	3 Sessions	Sep – Jan & Mar	Wednesday	4:30 to 6:30 pm	286 / Term
3. Saturday classes	3 Sessions	Sep – Jan & Mar	Saturday	9:30 to 12 am	325 / Term
4. Saturday classes	3 Sessions	Sep – Jan & Mar	Saturday	1 to 3:30 pm	325 / Term
5. Summer Camp	3 Sessions	July & August	Mond to Fri	8:45 to 5:45 pm	320\$/Session
6. Individual classes	On request				Fees / hour

I register my child for (you can register for as many programs as you require) -----

Program (Your choice): 1 2 3 4 5 6

- The balance should be paid to L'École Napoléon on the first month of the courses.
- Placement is only guaranteed with a non-refundable \$100 deposit or full payment.
- In the event of irregular attendance or interruption of the courses on the student's part, no reduction in price is applied.
- There is a \$40 cancellation fee per session per child
- There is a limited number of children accepted for each session.

Term 1 Term 2 Term 3 Summer camp

Program Nb: By cash cheque

Discount : \$.....
Fees : \$..... + Registration fees (apply only for the first registration) : \$10 = **total fees** :
 Deposit (or total amount): \$..... Balance due: \$.....

I/We agree that Ecole Napoléon, its directors, teachers and employees shall not be liable for any injury to my child or loss or damage to personal property arising from, or in any way resulting from participation in French classes, School or Camps activities unless such injury, loss or damage is caused by the sole negligence of Ecole Napoléon or its employees or teachers acting the scope of their duties. I further certify that the registrant is covered by OHIB and/or private health insurance.

SIGNATURE OF PARENT/GUARDIAN Date ____, ____, 201...

L'École Napoléon looks forward to serving you

For the administration
 Age Niveau Classe Professeur.....
Commentaires: