## **Spring 2020 REGISTRATION FORM (one per student)**

| TUDENT First NameSTUDENT Last Namestudent's age  |  |   |  |  |
|--|--|---|--|--|
| Parent 1 Full Name: .<br>Parent 2 Full Name: .   |  |   |  |  |
| Parent 1 Email (in <b>print</b> letters):<br>Home Address:   |  |   | Cell Phone: ()   |  |
| Parent 2 Email (in prin  | nt letters):   | Cell Phon   | e: ()  |  |
|  | LIABILITY RELEA  | ASE AND WAIVER  |  |  |
| minor participant. I agree on behalf of monopole of Indiana, its eclaims, liabilities, democosts) and all consequency/his/their participar | yself, my child named herein,<br>mployees, officers, directors, a<br>lands, injuries, damages, cost<br>lential damage arising out of | or our heirs, successors and a<br>and representatives from and<br>s, expenses (including reaso<br>injury or damages to my ch<br>activity of the mentioned abo | assigns, to hold harmless Russian against any and all suits, awards, nable attorney fees and related (children) in connection with ove school. By signing this form, I ol of Indiana |  |
|  |  | hotos would be occasionally   | s/Guardian's Printed Name published in RSI related articles  |  |
| Please mail the com<br>Carmel IN 46032   | pleted form and payment  | to: Russian School of India   | ana 3802 Steeplechase dr,  |  |
| PLEASE, FILL IN C  | CLASS/TIME/INSTRUCTO   | R INFO  |  |  |
| Class:   | Time:  | Instructor:   | Tuition: \$  |  |
| Class:   | Time:  | Instructor:   | Tuition: \$  |  |
| Class:   | Time:  | Instructor:   | Tuition: \$  |  |
| Class:   | Time:  | Instructor:   | Tuition: \$  |  |
| Pro-rated membership   | fee (one per student) \$75   |   |  |  |
| Lifetime Membership  | Fee (one per student) \$350  |   |  |  |
|  | TOTAL:   |   |  |  |
| Signature  |  | Date  |  |  |