



Registration Form

Program/Group: _____

Child's Name: _____

Child's Date of Birth: _____

Address: _____

Home Phone: _____

Parent(s) or Caregiver(s)

Name: _____

Name: _____

Email: _____

Email: _____

Cell: _____

Cell: _____

Work: _____

Work: _____

Names/Numbers of additional adults who will be picking up your child

Name: _____

Cell: _____

Name: _____

Cell: _____

Please list any allergies, precautions or special information.

Emergency Contact Information

Name: _____

Phone Number: _____

Relationship to child: _____

Physician's Name: _____

Phone Number: _____

I am enrolling my child because:

What are your child's interests? Toys, Games, Books, Action Figures, Sports, Music?

What are your child's strengths?



Consent for Class Participation

I _____, legal guardian of _____ do hereby give consent for my child (named above) to participate in Confident Kid Club, LLC's programs. I agree to release, hold harmless and waive all claims and causes of action that may hereafter accrue to me against Confident Kid Club, LLC, the co-founding partners and substitute instructors associated with any injury that may be caused as a result of any action other than the sole negligence of Confident Kid Club, LLC, and the co-founding partners and substitute instructors. I further agree to indemnify and hold harmless Confident Kid Club, LLC, the co-founding partners and substitute instructors, from any action or inaction of my child that may cause any injury or damage whatsoever. I hereby give full permission for my child to participate in all activities and agree to notify group leaders of any precautionary measures that should be noted or taken during group classes.

In the event of any injury to my child, I hereby grant full power of attorney to Confident Kid Club, LLC, the co-founding partners and substitute instructors to obtain any emergency medical treatment they (in their sole discretion) deem necessary in the best interest of my child. I will assume responsibility for fees incurred by such an emergency.

Legal Parent/Guardian Signature: _____ Date: _____

Photo Release

I grant Confident Kid Club, LLC permission to take photographs of my child and publish on their website and in printed promotional materials.

Please check below:

Yes ____ No ____

Payment due in full before first session. Please make checks payable to Confident Kid Club LLC and mail to:

Confident Kid Club
220 Highbrook Ave
Pelham, New York 10803