



# ATA-SC San Diego

American Turkish Association of Southern California, San Diego  
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## TURKISH SCHOOL REGISTRATION FORM SPRING 2008 SESSION

|                                     |   |                              |
|-------------------------------------|---|------------------------------|
| <b>STUDENT INFORMATION</b>          |   | <b>For Official Use Only</b> |
| Last Name                           | First Name  | Received Date:               |
| Date Of Birth                       | F <input type="checkbox"/> M <input type="checkbox"/> | Payment Amount:              |
| List of Siblings                    |   | Check#:                      |
| Hobbies/Sports/Activities           |   | Cash :                       |
| Address                             |   |                              |
| City                                | Zip   |                              |
| Phone Number                        | Email :   |                              |
| Health warnings /Allergies/Problems |   |                              |
| Insurance/Physican/ Phone Number    |   |                              |

## PARENT INFORMATION

|  |     |  |     |
|--|-----|--|-----|
| Mother's Name  |     | Father's Name                            |     |
| Mother's Adres(If Different)   |     | Father's Adres(If Different)             |     |
| City   | Zip | City                                     | Zip |
| Phone Number   |     | Phone Number                             |     |
| Email  |     | Email                                    |     |
| Would you like to Volunteer? Yes      No                                   |     | Would you like to Volunteer? Yes      No |     |
| Is there anyone who is allowed to pick up the student other than parents ? |     |  |     |
| Name _____   |     | Phone Number _____                       |     |
| Address _____  |     |  |     |
| City _____   |     | Zip _____                                |     |

The above named child/student has my permission to participate in ATASC-San Diego Turkish School activities. In the event of any injury , I hereby release and hold harmless from any liability ATA-SC , ATASC-San Diego , ATASC-San Diego Turkish School , its teachers, staff and the owner of the building in which the school activities are being held,for damages, or claim for personal injury including accidental death , as well as from claims for property damage which may arise in connection with the above named activities. Additionally , in the event of an injury that may demand medical attention, I hereby authorize emergency treatment for my child and I will be responsible for the payment for said treatment .

Signature of Student or Parent (If student is a minor )

Date

**PLEASE MAKE CHECKS PAYABLE TO ATASC-SAN DIEGO .**

Refund Policy : No partial refunds or make ups for missed classes. (Illness, vacation or schedule conflict .)  
Sorry , no exceptions !