## PARKS, RECREATION AND COMMUNITY SERVICES DEPARTMENT - RIVERSIDE ARTS ACADEMY

## **ACTIVITY REGISTRATION FORM AND WAIVER**

[ ] Policy and Contract [ ] Report Card [ ] CDBG Form [ ] Other

Form of Payment: [ ] Check # \_\_\_

[ ] Money Order #:

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	RIVERSIDE	(
	ACADEMY	

[] Visa [] Mastercard [] Am. Express [] Discover





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Parent/Guardian Name:										
Street Address:										
Day Phone: ( )								)		
Language Preference:		Best tir	ne to Contact: [ ]	Morning	[ ] Afternoo	n []Eve	ening			
[ ] Check if you live in the C	ity of Riverside cit	y limits. If not, non-res	idency fees may a	ipply.						
STUDENT INFORMAT	ION									
1. Student's Name:		Date of	Birth:		Age:	Langu	age Pref	erence:		
Please check the ethnicity the [] Latino [] African-America		·							other discriminatory man	ner):
Student's living arrangemen	nt: [] With Parent	s [] Foster Care/Parer	nts [] By Self [] O	ther:						
Please indicate if the studen	t has any medical	needs:			Allergies:			1	N/A[]	
			-							
Instrument:										
Student Email:			Student Cel	l Phone: _						
2. Student's Name:		Date of	Birth:		Age:	_Langua	ige Prefe	erence:		
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School (Currently Attending										
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CLASS AND PARTIC								_		
	PANT INFOR Activity Name	MATION  Participant's Name		Gender	Birth Date	Start Date	Shirt Size	Time	Activity Location	Fee
	Activity Name		LINE)	Gender M/(F)				<b>Time</b> 5:30 p.m.	1 -	<b>Fee</b> \$60
Class/	Activity Name	Participant's Name	LINE)		Date	Date	Size		Location	
Class/	Activity Name	Participant's Name	LINE)	M / (F)	<b>Date</b> 02/01/01	Date	Size		Location	
Class/	Activity Name	Participant's Name Sally Smith (SAMPLE)		M / (F)  M / F  M / F	Date 02/01/01 / / /	2/17	Size SM	5:30 p.m.	Bobby Bonds	
5 0 7 0 . 1 A Ballet 1	Activity Name	Participant's Name Sally Smith (SAMPLE)		M / (F)  M / F  M / F	Date 02/01/01 / / / e in PRCSD pr	Date 2/17 ograms.	Size SM underst	5:30 p.m.	Bobby Bonds  Journal of the state of the sta	
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