



(518) 930-0585
509 Moe Road
Clifton Park, NY 12065

To Register: please visit us online at www.bilingualgenius.academy or mail/bring your filled out form.

Registration Form

Summer Program 2017

Student's Info:

Name _____ Age _____

Birth date ____/____/____ Male Female Grade Entering ____/School _____

Address _____ City _____ Zip _____

Parent/Guardian Contact #1 Info:

Name _____ Relationship to student _____

Phone #: Mobile _____ Home _____ Email _____

Parent/Guardian Contact #2 Info:

Name _____ Relationship to student _____

Phone #: Mobile _____ Home _____ Email _____

Emergency Information during program hours & authorized people to pick up child:

Relationship _____ Contact 1# _____ pick up: Yes No

Relationship _____ Contact 2# _____ pick up: Yes No

Please note any recent/current illness/injury or existing medical conditions: _____

Allergies: Yes No If YES, please explain: _____

Prescription RX?: _____

PLEASE CHECK YOUR DESIRED SESSIONS ON THE NEXT PAGE.

REFERRED BY: _____

Payment:

Make check/money order payable to: **Kids Fun Plaza Inc.** We accept Visa, MasterCard, Discover & American Express

Please check method of payment: Check/Money Order MasterCard Visa Discover American Express

Exp. Date ____/____/____ Account No. _____ Card Holder: _____

If you have a promotional code enter here: _____ Security code: _____

Check Number: _____ Amount: _____ Date Received: ____/____/____

