



Long Meadow PTO www.lmespto.org

LMES AFTER-SCHOOL “YOGACIZE” REGISTRATION FORM

- “Yogacize” is a combination of physical fitness and mindfulness through yoga, breathing and stretching
- Led by Mr. Derouin and Mrs. McVerry
- Open to K-5 students
- Tuesdays, 3:40pm-5pm **OR** Wednesdays, 3:40pm-5pm
- 6 Tuesday sessions: 10/16, 10/23, 10/30, 11/13, 11/20, 11/27
- 6 Wednesday sessions: 10/17, 10/24, 10/31, 11/14, 11/28, 12/5
- Minimum enrollment: 10, Maximum enrollment: 25 per session
 - **Please indicate below which day you prefer, or if your child is available either day, please check “Either”**
- \$60 registration fee per child, please make checks payable to LMES PTO
- **Disclaimer for Returned Checks:** Returned checks are subject to a \$20 fee that the bank imposes on the PTO account. Any returned checks that do not clear on the 2nd attempt will be subject to an additional \$20 fee and the check value must be replaced with cash.
- We will send you an email confirmation once we receive your registration form and payment. Your registration is not confirmed until you receive this email. Included in this email will be pickup instructions, make-up policies should there be any cancellations and other important details.
- Questions? Email lmespto@yahoo.com

To register, please complete the following information, sign and return with full payment (checks made payable to LMES PTO) to the office **no later than Friday, October 5, 2018.** Please put in an envelope labeled **PTO-Yogacize.** *If registering more than one child, please complete a separate form for each.*

Child’s name: _____

Grade: _____ Teacher: _____

Parent name(s): _____

Phone: _____ E-mail: _____

Emergency Contact: _____ Phone: _____

My child can attend: <input type="checkbox"/> Tuesdays <input type="checkbox"/> Wednesdays <input type="checkbox"/> Either
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Waiver of liability: All people participate at their own risk and should make certain they have their own insurance. I understand and accept that all the inherent risks of participating in the “Yogacize” program on behalf of my child. I understand that David Derouin, Melodie McVerry and any person associated with Long Meadow Elementary School or Long Meadow Elementary School PTO shall assume no responsibility or liability for me or my child for accidents, illnesses, or loss of or damage to personal property resulting from participation in this program.

Parent/Guardian Signature: _____

Date: _____