Panola College KIDS’ COLLEGE
June 29 – July 1, 2015
Registration Form

Registration for KIDS’ COLLEGE will begin **Monday, April 20, 2015**. Enrollment is limited and classes will be filled as registrations are received.

<table>
<thead>
<tr>
<th>Student Last Name</th>
<th>Student First Name</th>
<th>Grade completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Parents’ or Guardians’ Names

<table>
<thead>
<tr>
<th>Parents'/Guardians’ Home Phone</th>
<th>Cell Phone</th>
<th>Work Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

Address

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

E-Mail Address

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**Tuition Payment**

**Registration (April 20 – May 22):**

Number of kids ____ X $120.00

**Siblings (added to first full-price enrollment):**

Number of kids ____ X $100.00

**Deadline to register is May 22nd at 12:00pm, or until classes are filled.**

**There will be no refunds after May 22, 2015.**

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**KIDS’ COLLEGE T-Shirts**

*Please circle the appropriate size.*

<table>
<thead>
<tr>
<th>Child Sizes</th>
<th>Adult Sizes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small</td>
<td>Small</td>
</tr>
<tr>
<td>Medium</td>
<td>Medium</td>
</tr>
<tr>
<td>Large</td>
<td>Large</td>
</tr>
<tr>
<td>Extra Large</td>
<td>XX Large</td>
</tr>
</tbody>
</table>

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**Payment Information:**

Total Amount Paid: $__________________________ Date:__________________________

Form of Payment: Cash □ Check □ Check #__________Visa □ MC □ Discover □ AE □

Credit Card #:__________________________ Exp. Date:__________________________

Name as it appears on Card:___________________________________________________

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*Panola College is an equal opportunity institution that provides educational and employment opportunities on the basis of merit and without discrimination because of race, color, religion, sex, age, national origin, veteran status, disability or genetic information.*
Permission, Medical, & Media Release Form

_________________________ has my permission to participate in Kids’ College 2015 sponsored by Panola College.

Allergies (food), medications, dietary restrictions, health problems or any other special considerations we need to be aware of:

________________________________________

MEDICAL RELEASE

I hereby authorize Panola College to photograph my child/children and any subject matter owned by me or my child, in still picture and motion picture form, and to record my child’s voice, or to cause such photographs and pictures and recording to be made. I hereby consent to the exhibition of such photographs and pictures and the use of my child’s name and voice by you, the world, whether such exhibition and use are sponsored or not. I also consent to the use of such photographs, the right to use my child’s name, voice and photographs and pictures in advertising and in publicity in connection with a subsequent exhibition, and in the exhibition itself.

I hereby release you and all other parties from any and all liability, claims or causes of action, arising out of, or created by, the use of my child’s photograph or photographs, picture or pictures, and name and voice, as set forth above.

This authorization, consent and release shall apply to all photographs, pictures and recordings of the above-singed, made with the knowledge and acquiescence of the above-singed, from the date hereof until the above-singed shall give you written notice that this authorization, consent and release in no longer effective.

This agreement shall be binding on me, my heirs, administrators and executors, and shall inure to the benefit of you, your successors, assigns or licensees.

Participant Name: __________________________

Parent/Guardian Name (Print): __________________________

Parent/Guardian Name Signature: __________________________

RELEASE & WAIVER OF LIABILITY

The undersigned hereby acknowledges that participation in this camp and related activities involves a possible risk of physical injury. The undersigned on behalf of the registrant, hereby assumes all such risk and does hereby release and forever discharge the camp and all the employees and agents thereof from any and all liability of whatever kind or nature, rising from and by reason of any and all known and unknown, foreseen and unforeseen, bodily injury and personal injuries, damage to property, and the consequences thereof, resulting from the registrants participation in or involvement with this camp, including any failure of equipment or defect in the premises.

I hereby state that I am the legal guardian of said registrant.

Participant Name: __________________________

Parent/Guardian Name (Print): __________________________

Date: __________________________

Parent/Guardian Name (Signature): __________________________

_________________________ has my permission to participate in Kids’ College 2015 sponsored by Panola College.

Allergies (food), medications, dietary restrictions, health problems or any other special considerations we need to be aware of:

________________________________________

Medical Release

Parent/Guardian Signature: __________________________

Preferred Physician: __________________________

Dr. Phone: __________________________

Preferred Hospital: __________________________

Emergency Contact: __________________________

Phone: __________________________

Insurance Carrier: __________________________

Policy #: __________________________

In the event of a medical emergency, I authorize the personnel of Panola College Kids’ College to seek appropriate medical attention for my child.

The following people have permission to pick up my son/daughter:

Name: __________________________

Phone: __________________________

Name: __________________________

Phone: __________________________

Name: __________________________

Phone: __________________________

The following people have permission to pick up my son/daughter:

Name: __________________________

Phone: __________________________

Name: __________________________

Phone: __________________________

Name: __________________________

Phone: __________________________