

CLASS REGISTRATION FORM

Fill out forms completely, only one family per registration form



FOR ONLINE REGISTRATION

and credit card payment, visit
<http://brightonschools.revtrak.net>

REGISTER EARLY!

Class may be cancelled one week prior to start date if they haven't met their minimum.

Name (Circle One - Parent/Guardian/Self)..... Email.....

Street Address..... City..... Zip.....

Home Phone..... Cell Phone.....

Brighton School Senior Citizen Card Number
 (required to qualify for Senior Citizen Discount Fee)

MAKE CHECKS PAYABLE TO BRIGHTON CENTRAL SCHOOLS

Mail-in registration by check, or cash/check payment in person is delivered to
Community Education, 2035 Monroe Avenue, Rochester, NY 14618.

	<i>Participant</i>	<i>Birthdate</i>	<i>Class Name</i>	<i>Class Number</i>	<i>Fee</i>
1					
2					
3					
4					
5					
6					

TOTAL FEES \$

Refund Policy/Photo Release:

The Community Education office will process a full refund of class fee in the event of class cancellation. Refunds will not be processed after a class has begun, unless request is accompanied by a doctor's certification of illness. All requested refunds are subject to a \$5 processing fee.

I hereby release Brighton Central School District (BCSD) Community Education and any of its staff from any responsibility in connection with this activity. I fully realize that I must provide proper hospitalization. I also give consent for photos taken of myself or my child to be used by Community Education for promotional material including, but not limited to, the Community Education seasonal catalog and the BCSD website, without prior notification.

Please sign here agreeing to the above: _____

_____ Check here if you DO NOT want photos of you and/or your child(ren) to be used.

FOR OFFICE USE ONLY

<i>Date Received</i>	<i>Date Entered</i>