



**Explorer Information**

Name \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

**Parent/Guardian Information**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

**Guide Information**

\*Your child's guide is the adult who will be accompanying him/her to class.

Name \_\_\_\_\_ Relation \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

**Other**

Does your child have any allergies (including ingesting or touching), sensory sensitivities, or medical issues?

\_\_\_\_\_

Anything else you would like us to know to make your Explorer's time in class more meaningful?

\_\_\_\_\_

**Enrollment & Payment**

The class fee for our five-week winter course is \$100 per child. There is a \$20 yearly registration fee per child. Payment and registration form are both due at time of enrollment. Forms can be emailed to ElevateEnrichment@gmail.com and payment can be sent via Venmo to @Elevate-Enrichment. Feel free to contact us with any questions via email or 615.308.8793.

**Informed Consent and Acknowledgement**

I hereby give my approval for my child's participation in any and all classes and activities prepared by Elevate Enrichment Center and its' teachers during the 2024-2025 school year. In exchange for the acceptance of said child's participation, I assume all risk and hazards incidental to the conduct of the activities while my child is in attendance, and release, absolve and hold harmless Elevate Enrichment Center, it's owner, teachers and all its' representatives from any and all liability for injuries to said child arising out of participating in sessions. In case of injury to said child, I hereby waive all claims against Elevate Enrichment Center, including all teachers, participants, owners and lessors of premises used to conduct the classes.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_