

The Scandinavian School



The Scandinavian School Afternoon programs Parent Agreement Form

Please complete the form to enroll in classes at The Scandinavian School San Francisco and Menlo Park locations (one form per student)

Students cannot attend classes before the form is completed and signed.

Student Information

Student Name:

Date of Birth (mm/dd/yy):

Gender:

Allergies:

How do you evaluate your child's speaking, listening, reading, and writing proficiency in Swedish?

Any special circumstances we should know about your child:

Parent 1's Name:

Cell Phone Number:

E-mail address:

Swedish citizen: Yes / No

Languages (native, fluent, proficient, or basic):

Parent 2's Name:

Cell Phone # :

E-mail address:

Swedish citizen: Yes / No

Languages (native, fluent, proficient, or basic):

Home Address:

Home Telephone Number:

Emergency Contact (Name and Phone Numbers):

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Parent Agreement

1) We,

agree to the following terms and conditions regarding the enrollment of our child,

, in the Swedish, Danish, Norwegian (please circle) program at The Scandinavian School's afternoon program in San Francisco / Menlo Park (please circle). (The term "we" as used below includes both the parents or the guardian of whose signature appear below)

1. We give permission for our child to participate in all activities of the Scandinavian School Menlo Park / San Francisco (please circle). We understand that there are risks involved in these activities (such as, but not limited to, injuries due to falling indoors or outdoors, choking on snacks or toys), and we release and hold harmless The Scandinavian School in San Francisco or Menlo Park (the "School"), its directors, officers, members and employees (the "School Personnel"), The school's landlord from any claims for bodily injury or death or damage to personal property due to such risks, except to the extent caused by the Scandinavian School or Scandinavian School Personnel's grossly negligent acts or omissions.

2. In addition, we agree to indemnify, defend and hold harmless, The Scandinavian School Personnel, from any claims for bodily injury or death or damage to personal property due to our negligent acts or omissions.

3. We hereby grant permission to any licensed physician, hospital or medical treatment required should our child become ill or injured while attending class at The Scandinavian School in San Francisco or Menlo Park and a parent or guardian is not available to grant authorization for such treatment. We understand that the expense for such treatment is our full responsibility.

4. On occasion, photos may be taken during classes and activities. These photos may be used in promotional material for the Scandinavian School in San Francisco and Menlo Park. For privacy and security reasons, the children's names will not be associated with the photographs in any public materials. We hereby give our consent to the Scandinavian School in San Francisco and Menlo Park to use and reproduce in connection with school related activities and promotional or other materials representing

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the Scandinavian School, and any images (including photographs, videos or printed materials, slideshows, social media and internet websites). We understand that there will be no compensation to us for any such use. We hereby agree to this.

5. I/We agree that our name, address, home phone number and email address will be distributed to the parents of all the children enrolled in The Scandinavian School's afternoon program in San Francisco and Menlo Park.

6. We are aware that tuition can change during the year. We have read and understood the information and agree to abide by the conditions and the above agreement. Upon request we can receive a copy of this agreement.

Signature (Parent 1/ Guardian 1)

Date

Signature (Parent 2/ Guardian 2)

Date