

LAHSD 2009-10 Registration Form

Parent Information

Parent Names: _____ Email: _____
(one parent checks regularly)

Street Address: _____

City: _____ Zip: _____ Home Phone: _____

Cell Phones: _____ (Mom) _____ (Dad)

LAHSD Student Information

All LAHSD students may enroll in speech, but will have to choose between logic and debate.
If you're interested in only participating in one event (speech or logic or debate) that is fine.
Please note our club Annual Fee is *non-refundable* and has a family maximum of \$100

Student name	DOB	Email	Check all that apply	Annual fee
1. _____	_____	_____	___Speech ___Logic ___Debate	\$75
2. _____	_____	_____	___Speech ___Logic ___Debate	\$15
3. _____	_____	_____	___Speech ___Logic ___Debate	\$10
4. _____	_____	_____	___Speech ___Logic ___Debate	no charge
5. _____	_____	_____	___Speech ___Logic ___Debate	no charge

Please add \$10 per debate student for the cost of our club's debate case writer. \$ _____

GRAND TOTAL \$ _____

Please make checks payable to: LAHSD

Liability Waiver

In consideration of permission to use the facilities and equipment of the Wingard property, I, for myself and my children, do hereby release Terry and Maura Wingard from liability of any and all claims resulting in personal injury, accidents or illness (including death), arising from participation in LAHSD.

(Signature of parent/guardian)

(Date)

Medical Release

I, the undersigned parent/guardian of the minor(s) stated above, give permission and consent for emergency medical transportation and care. This care may be given under whatever conditions are deemed necessary to preserve life, limb or well-being of the minor(s).

(Signature of parent/guardian)

(Date)

For office use only: Amount paid _____ Check number _____ Amount owed _____