



Program Registration

Participant's Name: _____ Age: _____

Parent's Name: _____
(if participant is under 18 years of age)

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

Emergency Contact (other than parent): _____

How did you hear about this program? _____

Please list the program(s) you wish to register for:

Program: _____ Day _____ Time _____ Cost _____

Program: _____ Day _____ Time _____ Cost _____

Program: _____ Day _____ Time _____ Cost _____

Payment Method:

Check or money order enclosed (made payable to Building Blocks)

Charge my: MasterCard Visa American Express Discover

Card#: _____ Exp: _____ 3 digit code: _____

Authorized Signature: _____

Please read and sign the following release:

In consideration of the participants being permitted to enroll in the program(s) listed above, I hereby release, indemnify, and hold harmless Building Blocks, its employees, operators, and instructors from any and all claims and demands, costs, charges, and expenses for harm, injury, damage, or loss which may be sustained by the participant as a result of or relating to participation in the program(s) listed above. I also understand that each participant has the responsibility to exercise due care in the performance of the activities/program(s) listed above for the safety of himself/herself and the other participants.

I have read, and I understand, the above liability release

Participant Signature: _____

Parent, guardian, or legal custodian _____
(if participant is under 18 years of age)

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