

## 2020 SUMMER SCHOLARS REGISTRATION

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Name of School Currently Attending: \_\_\_\_\_ Grade Entering in the Fall: \_\_\_\_\_

**\*Name of course student is registering for:** \_\_\_\_\_

- **I/we understand that a minimum of 5 students are required to run a class.** Enrollment in Summer Scholars requires each student to abide by the rules and policies of NSU University School as read in the student handbook. By signature, I/we accept financial responsibility for the Summer Scholars tuition and fees. **Once fees are paid, I/We realize that there are non-refundable and make-up days are unavailable.**

**Initial:** \_\_\_\_\_

- The use of my photograph and/or my child's photograph(s) in NSU University School publications, Web site, and/or advertisements is authorized.
- I/we hereby release and hold harmless Nova Southeastern University; it's Board and Officers and NSU University School, its officers, trustees, directors, employees, and agents from all liability, including claims and suits at law or in equity, for injury, fatal or otherwise, which result while the student is taking part in all NSU University School summer programs/classes.
- I/we hereby agree that I/we will be responsible for any loss, damage, or destruction by the student and is not responsible for any lost, stolen, or damaged personal property that my child brings to the program.

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

**Mother/Guardian/Co-Parent:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Father/Guardian/Co-Parent:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home #: \_\_\_\_\_ Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Emergency/Authorization to release:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Pay By: Check • Cash • MasterCard • Visa • American Express**

**Registration forms can be faxed or submitted to the Camp office located in the Lower School in the Business office**

**Make check payable to: Camp Nova**

**Cardholder's Name:** \_\_\_\_\_ **Amount:** \_\_\_\_\_

**Credit card #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_