## **REGISTRATION FORM**

Please Attach Check OR Money Order Payable To Fox Chapel Area Adult Education (FCAAE)

Mail To: FCAAE, 611 Field Club Road, Pittsburgh, PA 15238

More	than one adult may use this for	m BUT every	student must sign the release.
First Name:		Last Name:	
Address:		City, State, Zip	o:
Home Ph	one:	Cell Phone:	
Email Ad	dress:	Business Phor	ne:
□Fox Chapel Sc	Fee Status: Please check  shool District Resident*	nployee* $\square_{Owne}$	r of In-District Business* □ Non-District Resident
Plea	consider making a donation to help FCAAE continue its mission of providing lifelong learning, fun, and fitness.		
	Enclosed is my tax-deductib	le gift of \$	Thank you!
If En	Irolling in Family Swim, please indicate the number of Fenrolling in Classes with Multiple Sessio Course title  GENERAL WA	NS, PLEASE INDICATE	family and sign a waiver for each swimmer DAY(S) OF THE WEEK AND SESSION(S) DAY/SESSION  RELEASE
independent con participation in the Chapel Area Adu representatives, so contract, or other stand and acknow and warrant that	IMPORTANT NOTE: EVERY , do hereby apply for enrollment in a Fox 0 and in the Course for the stated fee, which is enclosed, I agree tractors, 2) requires no certifications, and 3) reserves the right activities of the Course, and hereby agree to assume all such a literal Education Committee and the Fox Chapel Area School Dissiponsors, instructors, employees and volunteers, from any and wise, except for such conduct which would be considered intentiveledge that the Course involves physical activities and/or contact I am physically fit and I have no medical condition that would provided and competency, and, if applicable, on the minor identified below.	Chapel Area Adult Education e as follows: I understand t to substitute instructors a risks and take full and exclu trict, its successors and as all claims for any and all p cional or gross negligence, a ct which create an inherent prevent my full participation	n course, as above identified ("Course"). In consideration of be that Fox Chapel Area Adult Education 1) engages instructor at any time. I understand all risks that may be associated in sive responsibility for them and hereby waive and release the signs, together with their respective directors, officers, age ersonal injury, property damage or destruction, death, bread II of which arose from my participation in the Course. I fully un risk and danger of minor or serious injury or of death. I reprend in the Course. The waiver and release shall be binding upon
Signature Signature abo	<b>Date</b> ve indicates student is 18 years of age or older	Signature Signature above in	<b>Date</b> dicates student is 18 years of age or older
For Minors: With the age of 18 are classes with the p	the exception of Family Swim and classes where students under welcomed in the course description, minors may only attend ermission of the Executive Director and instructor. No minor may nless accompanied by an adult registered for the same class.	Chapel Area School I Because our classes n	Adult Education Committee (FCAAE) is an outreach program of the District dedicated to providing enrichment classes to the communeet in school district buildings, they are subject to last-minute challool activities. FCAAE does not discriminate on the basis of race, c

Name of Minor (for courses that allow minors)

Parent/Legal Guardian for Minor Student

Date

Date

The Fox Chapel Area Adult Education Committee (FCAAE) is an outreach program of the Fox Chapel Area School District dedicated to providing enrichment classes to the community. Because our classes meet in school district buildings, they are subject to last-minute changes due to conflicting school activities. FCAAE does not discriminate on the basis of race, creed, color, sex, nationality, ethnic origin, age, or disability in the administration of its policies, hiring practices, employment practices, and admission to its programs, services or activities, in access to them, in treatment of individuals with disabilities or in any aspect of its operations.