

2017 REGISTRATION



Give your child the fun, education, and awe of our exceptional Summer Programs!

Contact us at 787.796.0440 Ext.242 || mendoza.t@tasisdorado.com || tasisdorado.com

Please fill out one form for each student to be enrolled in our MARINE BIOLOGY Summer Program at TASIS Dorado.

STEP 1: Please complete the Registration Form.

STEP 2: Bring your Registration Form to our TASIS Dorado Business Office to make your payment in order to complete the registration process. Please contact Gloria Santiago 787-796-0440 Ext. 294 for any payment questions.

STUDENT INFORMATION

Child's Full Name _____

Current Grade _____ Current School _____ Gender (M or F) _____ Age _____

Mother/Legal Guardian's Full Name _____ Email / Cell Phone _____

Father/Legal Guardian's Full Name _____ Email / Cell Phone _____

Address _____

City _____ State _____ Zip Code _____

MARINE BIOLOGY SESSION I
June 5 - June 9
8:00 AM - 4:00 PM
\$400

- **3rd to 5th graders only**
- Student must know how to swim
- Snorkeling gear and life vest required

MARINE BIOLOGY SESSION II
June 12 - June 19
8:00 AM - 4:00 PM
\$400

- **3rd to 5th graders only**
- Student must know how to swim
- Snorkeling gear and life vest required

MARINE BIOLOGY SESSION III
June 19 - June 23
8:00 AM - 4:00 PM
\$450

- **6th to 8th graders only**
- Student must know how to swim
- Snorkeling gear and life vest required

How did you learn about our Summer Program?

(Please check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Website | <input type="checkbox"/> Flyers |
| <input type="checkbox"/> Online Search | <input type="checkbox"/> Outdoor Banners |
| <input type="checkbox"/> Alumni Family | <input type="checkbox"/> Sabanera Resident |
| <input type="checkbox"/> Facebook/Instagram | <input type="checkbox"/> Realtor |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Family or Friend | |

Has your child previously been enrolled in any of our Summer Programs?

Yes No

If yes, which program and year(s) of attendance?

Any special requests or concerns?

Please complete Parent/Guardian Consent and payment information on the back.



PAYMENT & CONSENT FORM

PAYMENT INFORMATION

REGISTRATION IS NOT COMPLETE UNTIL THE FEES ARE PAID. STUDENTS WILL BE WAITLISTED IF THERE IS NO ROOM. Please note that entire fee has to be paid with the completed registration, payment and consent forms.

Cash Check/MO # _____ (made payable to "TASIS Dorado") MasterCard VISA AMEX

- Payments by Cash, ATH, Check, Money Order or Credit Card (MasterCard, Visa) must be made at the **TASIS Dorado Business Office**.
- **American Express cardholders** may pay by phone by calling Gloria Santiago at 787-796-0440 Ext. 294.
- TASIS Dorado reserves the right to cancel any programs that do not have sufficient enrollment.

DISCOUNTS*

Sibling Discount - \$25 per session
Applicable to 2nd and additional siblings for families with more than one child enrolled at the same time. The first child must pay the full session fee.

- These discounts are not applicable to TD Faculty/Staff.
- For Employee Discount information, please contact the Business Office.

FOR BUSINESS OFFICE ONLY:

Total: \$ _____

*Discounts (if applicable)
Minus Sibling Discount - \$ _____

TOTAL: \$ _____

Payment received by: _____

Date: _____

CANCELLATION / REFUND POLICY

First, we would like to encourage you to move to another session so that your child can have the experience of the Marine Biology Summer Program. However, we understand that situations arise, and you may need to cancel altogether. To do so, please call or email us with this information.

- Tuition is not refundable or transferable at any time, unless it is for a medical reason (must have written explanation from doctor).
- If you cancel with more than 30 days until the session start date, then you will receive all money paid EXCEPT 10% refund.
 - 15-30 days until the session start date, 50% refund.
 - Two weeks before start of Summer Program session = NO REFUND.

MEDICAL REASON FOR CANCELLATION

We understand that medical issues may arise over the Summer or just as your child is set to attend camp. Please call us as soon as possible to inform us of your need to cancel. We will ask that you submit a written excuse from your child's physician. If your child is sick and there is time and room, we will work with you to switch your child to a later session.

PARENT/GUARDIAN CONSENT

This application is subject to the completion of all necessary forms and a personal interview with the program director, if requested. I understand that I must be in good standing to register. I request that the child named be admitted to the designated Summer Program(s). Acceptance is at the discretion of TASIS Dorado (TD). I hereby give my consent for my child to participate in the TD Summer Program sponsored and all personnel associated with the program shall not be held liable for any injury whatsoever my child may sustain in the activities thereof. I also certify that I know of no physical problems or conditions of my child which would impair participation in the program. I authorize the person in charge to secure first aid and/or the services of any legally qualified physician or hospital and agree to assume all financial obligations connected therewith. I further grant permission for the use of photographs, motion pictures, recordings or any other records for any legitimate purpose. I hereby give permission for the child named to attend TD Marine Biology Summer Program field trips. I agree to complete payment four days before the session starts.

This form will not be accepted without Parent/Guardian Consent signature.

Student's Name _____

Parent/Guardian's Name (Print Clearly) _____

Parent/Guardian's Signature _____ Date _____

