



# Sts. Constantine and Helen Cardiff-by-the-Sea Greek Language School ADULT Registration Form 2024 -2025

**All students, new and returning, are required to complete this registration form before Greek School begins**  
**Tuition is \$375.00 Note: Book fees are: \$TBD prior to class. Please pre-register by: Sept 29, 2024**

**General Information:**

**Name:** \_\_\_\_\_  
First Name Last Name

**Home Address:** \_\_\_\_\_  
Street/PO Box & Apt. # City State Zip

**H Phone:**(    ) \_\_\_\_\_ **Cell Phone:**(    ) \_\_\_\_\_ **Other Phone:**(    ) \_\_\_\_\_

**Email Address** \_\_\_\_\_ @ \_\_\_\_\_

*In case of an emergency, whom may we call?*

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

**Do you have any allergies or require any medications? Yes** \_\_\_\_\_ **No** \_\_\_\_\_ **Please list:** \_\_\_\_\_

**New Student?**  Yes  NO    **Last level completed in any Greek Language Program** \_\_\_\_\_

**On a scale of 1-5 please give us information regarding your Greek language abilities:**

**Speaking** \_\_\_\_\_ **Reading** \_\_\_\_\_ **Writing** \_\_\_\_\_ **Comprehension** \_\_\_\_\_ **Comfort** \_\_\_\_\_  
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**Release Form – PLEASE READ CAREFULLY**

**I hereby grant Sts. Constantine and Helen Greek Orthodox Church the right to photograph me and use the photo and or other digital reproduction for publication processes; whether electronic, print, digital or electronic publishing via the Internet. This does include our school directory. Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**I agree to waive and release Saints Constantine and Helen Greek Language School (which includes its officers, teachers, employees and volunteers) from any claims, cause of action, damages, losses, liabilities or expenses for any personal injury, property damage or death arising out of my participation in any activities and events, regardless of whether personal injury, property damage or death was caused by Greek Language School personnel or otherwise. I understand that signing this waiver I am freeing the Greek Language School of Sts. Constantine and Helen Greek Orthodox Church (Cardiff-by-the-Sea, CA) from any liability resulting from child/children participation in the activities and events. I certify that I have personally read and understand the waiver.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**PLEASE DO NOT WRITE BELOW THIS LINE**

**Class Day & Time:** \_\_\_\_\_ **Tuition & Books Due:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_  
**Check #/Transaction#:** \_\_\_\_\_