

Children's Spanish Club Registration Form

Personal Information:

1. Child's Full Name: _____
2. Date of Birth: _____
3. Age: _____
4. Gender:
 - Male
 - Female
 - Other
5. Parent/Guardian Name(s): _____
6. Relationship to Child: _____
7. Emergency Contact Name: _____
8. Emergency Contact Phone Number: _____
9. Email Address: _____
10. Alternative Phone Number: _____
11. Any previous experience with the Spanish language?
 - None
 - Beginner
 - Intermediate
 - Advanced
12. Does your child have any allergies or medical conditions we should be aware of?
 - Yes (Please specify) _____
 - No
15. Any additional information or special needs?

Consent and Agreement:

16. I give my consent for my child to participate in the Children's Spanish Club activities.

- Yes
- No

17. I agree to the club's terms and conditions (please attach a copy of the terms).

- Yes
- No

18. Signature of Parent/Guardian: _____

19. Date: _____