

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

**Payment Due By:
 Friday, August 26,
 2011 .**

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #1 August 29—September 2

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
08/29	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
08/30	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
08/31	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/01	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/02	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
September 2,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #2 September 5-9

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
09/05	CLOSED	
09/06	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/07	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/08	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/09	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
	All Morning and Afternoon Sessions	\$32 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
September 9,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #3 September 12-16

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
09/12	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/13	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/14	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/15	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/16	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
September 16,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #4 September 19-23

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
09/19	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/20	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/21	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/22	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/23	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB
 OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
September 23,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #5 September 26-30

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
09/26	6:00am—6:00pm · ALL DAY @ FIS	\$8 <input type="checkbox"/>
09/27	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/28	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/29	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
09/30	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
	All Morning and Afternoon Sessions	\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
September 30,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #6 October 3-7

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
10/03	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/04	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/05	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/06	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/07	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

**Payment Due By:
 Friday, October 7,
 2011 .**

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #7 October 10-14

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
10/10	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/11	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/12	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/13	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/14	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB
 OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday, October 14,
2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #8 October 17-21

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
10/17	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/18	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/19	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/20	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/21	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

**Payment Due By:
 Friday, October 21,
 2011 .**

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #9 October 24-28

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
10/24	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/25	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/26	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/27	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
10/28	CLOSED	
All Morning and Afternoon Sessions		\$32 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Thursday,
October 27, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #10 October 31-November 4

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
10/31	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/01	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/02	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/03	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/04	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
November 4, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #11 November 7-11

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
11/07	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/08	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/09	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/10	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/11	CLOSED	
All Morning and Afternoon Sessions		\$32 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB
 OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Thursday,
November 10, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #12 November 14-18

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
11/14	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/15	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/16	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/17	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/18	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB
 OF TRUCKEE MEADOWS

· In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

· I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
November 18, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #13 November 21-25

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
11/21	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/22	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/23	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	12:00pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/24	CLOSED	
11/25	CLOSED	
All Morning and Afternoon Sessions		\$24 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Wednesday,
November 23, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #14 November 28—December 2

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
11/28	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/29	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
11/30	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/01	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/02	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
December 2, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #15 December 5-9

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
12/05	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/06	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/07	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/08	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/09	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
December 9, 2011 .

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #16 December 12-16

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
12/12	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/13	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/14	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/15	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/16	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____

FIS Before and After School Program

Fernley Intermediate School
 320 Highway 95A South
 Phone (775) 303-5901
 Fax (775) 331-3677

One Sign Up Sheet Per Member

First Name _____

Last Name _____

Current Phone # (Mobile) _____ (Work) _____

Would You Like A Receipt? Yes No



BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

In consideration of my child's membership and participation in the activities, special programs and/or special events of the Boys & Girls Club, I hereby fully waive, release, and hold harmless the Boys & Girls Club, together with all its agents, employees, representatives, officers, and directors from any and all claims, causes of actions, damages, costs, expenses, and other liabilities in any way arising out of or resulting from such membership or participation, including, but not limited to, any personal injury, accident, illness, property damages or any loss, injury or harm of any nature whatsoever.

I attest and verify that I have full knowledge of any and all risk involved in such membership and participation, and that I will, on behalf of the named member(s), assume full responsibility for such risks and pay any and all medical, emergency, and other costs and expenses in the event of injury, accident, illness, casualty or other incapacity regardless of whether I have authorized such expenses. I acknowledge that my child is in good health, physically fit, and sufficiently trained to participate in membership and in programs, activities, and events of the Boys & Girls Club.

Parent/Guardian Signature _____

REMINDER

Payment Due By:
Friday,
December 16,

OFFICE USE

PAYMENT METHOD

Date: ___/___/11

Entered By: _____

- Cash Visa/MasterCard
 Check Money Order

Session #17 December 19-23

<u>Date</u>	<u>Time and Description</u>	<u>Cost</u>
12/19	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/20	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/21	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/22	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	3:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
12/23	6:00am—8:15am · Before School	\$4 <input type="checkbox"/>
	2:15pm—6:00pm · After School	\$4 <input type="checkbox"/>
All Morning and Afternoon Sessions		\$40 <input type="checkbox"/>

Weekly Total \$ _____