

**Freeplay, LLC Presents**  
**Summer Programs -- At Hale Charter Academy**

Student Name: \_\_\_\_\_ Grade in Fall 2018: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email (Parent/Guardian): \_\_\_\_\_ School Attended 2017-18: \_\_\_\_\_

Request to be in group with: \_\_\_\_\_

We will do our best to honor all group requests.

**Please select the program you would like to register for at Hale Charter Academy:**

\_\_\_\_ **6<sup>th</sup> Grade Bridge Program** – Open to all incoming 6<sup>th</sup> grade students  
July 30, 2018 – August 3, 2018 (8:00am – 12:20pm) -- \$350

\_\_\_\_ **Intro to Algebra 101** – Open to all students that will be taking Algebra in 2018-19  
July 30, 2018 – August 3, 2018 (8:00am – 12:20pm) -- \$350

Total: \$ \_\_\_\_\_ Payment made by: \_\_\_\_\_ CASH \_\_\_\_\_ CHECK# \_\_\_\_\_

**To register by mail - send completed form and payment (payable to "Freeplay, LLC") to:  
Freeplay - Hale, 19360 Rinaldi Street # 690, Porter Ranch, CA 91326**

**\*\*\*\*\*Registration is open until all classes are full. We will do our best to accommodate everyone, but due to limited space, we will process forms in the order they are received. No refunds after June 1, 2018\*\*\*\*\***

You will receive an email confirmation once the registration is processed

**Release and Medical Consent Agreement:** Although we will provide the utmost quality of care and supervision to insure the safety of our students, accidents can happen. I, the undersigned, as parent or legal guardian of \_\_\_\_\_ in authorizing participation in this summer program, hereby voluntarily and knowingly execute this release with the express intention to hold harmless Freeplay, LLC, its officers, employees, agents, and affiliates from any and all claims, actions, demands or rights to any and all monetary judgment whatsoever arising from any and all injury or physical harm which may occur to the student participant, especially relating directly or indirectly to any act or omission of perceived negligence resulting in injury or loss of life when participating in any activities associated with Summer Programs, regardless of predisposed medical conditions. In the event of an emergency, I give Freeplay, LLC, and its staff and designees the right to provide emergency medical care at their discretion in case the legal guardian or I, the parent, cannot be contacted. I understand there is no affiliation between Freeplay, LLC, and LAUSD or Hale Charter Academy. I have read, understand, and expressly agree to the above statements. By the execution hereof I do further bind myself, my child or legal ward and all heirs, executioners, administrators, or assigns of the same. I have read, understand, and expressly agree to the above statements. By the execution hereof I do further bind myself, my child or legal ward and all heirs, executioners, administrators, or assigns of the same. I understand there are no refunds after June 1, 2018.

\_\_\_\_\_  
**Authorization Signature of Parent or Guardian**

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

PLEASE WRITE ANY PREEXISTING MEDICAL CONDITIONS WE NEED TO KNOW ABOUT.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please email [HaleBridgeProgram@gmail.com](mailto:HaleBridgeProgram@gmail.com) for more information**