

Registration Form – ECLC Alumni Social Group Dances
RETURN ALL FORMS WITH DUES

August 2017

It is agreed that _____ will be attending the alumni socials held each month from September, 2017 through June, 2018.

Parents/guardians who chaperone and ECLC of NJ, are released from any liability arising from his/her (member's) attendance at these socials.

ECLC does not have any medical or other facilities for emergencies so the above mentioned individuals cannot be held responsible for any medical emergencies or any other liability.

Member's Full Name _____ Birth Date _____

Name of Parents/Guardian _____
Mother Father

Address _____
_____ Zip Code _____

Home # _____ Cell # _____

IF USING ACCESS LINK – WE MUST HAVE IDENTIFICATION NUMBER: _____

Parent/Guardian Signature

Member's Signature

___ Check enclosed payable to ECLC Alumni Group

Alumni fee is \$80.00

Mail all forms and payment to:
Must be received by 9/8/17

Mrs. Gagliardi, Principal
ECLC of New Jersey
21 Lum Avenue
Chatham, NJ 07928

Forms to be returned: **Registration Form** with payment* (contact Mrs. G if payment is a concern).
Medical Form Chaperone Form Behavioral Contract