

# Kettles Crafts



Last Name: \_\_\_\_\_

Cottage Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Phone & Contact: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Is your family a current paid member of the Kettles Association for 2010? Yes  No

•Participants who are not members of the Kettles Association will be charged a fee of \$10.00 per week

***Craft classes are Monday and Wednesday Mornings***

Craft Session	Age	Time	Cost
A	5-7	9:30-10:30	\$15 per class
B	8-10	10:30-12:00	\$20 per class

Participants Name	Age	Session	Number of Classes	Fee
		<b>Session A</b> <input type="checkbox"/> <b>Session B</b> <input type="checkbox"/>		
		<b>Session A</b> <input type="checkbox"/> <b>Session B</b> <input type="checkbox"/>		
<b>Total</b>				

### Waiver

*This is my consent for my family (the "Participants") to participate in activities organized by the Kettles Association (the "Activities"). In consideration for the Participants being permitted to take part in the Activities, I hereby release and discharge the Kettles Association, its directors, officers, members, employees, agents, independent contractors and volunteers from all claims, actions, causes of action or demands, including claims in negligence, arising out of, or in any way connected with the Participants participation in the Activities, howsoever arising or caused. I declare that this release is binding upon me, my children and each of our heirs, executors, administrators and assigns. I further certify that the participants are all covered by OHIP and/or private health insurance.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_