



**CEDAR**  
INTERNATIONAL  
**SCHOOL**  
BRITISH VIRGIN ISLANDS

## **Co-Curricular Clubs and Activities Programme Session Three 2023 - 2024 Registration Form**

***Please complete the form below and return it to the School's Office.  
This form is to be completed for the free clubs as well.***

I understand that although Cedar International School is the sponsor of the Co-Curricular Clubs and Activities Programme the school does not assume responsibility for any loss, injury to the person or property in connection with the participation of \_\_\_\_\_ in the programme, regardless of the cause of such loss, injury, damage or expense and whether or not caused by any negligence or fault.

**Release:** I fully release, waive and further agree to indemnify Cedar International School and its volunteers, members, officers, directors, committees, and/or employees arising out of, during or in anyway connected with such participation from and against and all claims which I, my heirs or executors may have for any losses, damages and injuries arising out of, during or in connection with the participation of \_\_\_\_\_ in Co-Curricular Clubs and Activities Programme or in rendering any first-aid, emergency medical procedures or any related expenses if any.

Signed \_\_\_\_\_ (Student) Date: \_\_\_\_\_

Signed \_\_\_\_\_ (Student) Date: \_\_\_\_\_

Signed \_\_\_\_\_ (Student) Date: \_\_\_\_\_

Contact phone number \_\_\_\_\_ Contact phone number \_\_\_\_\_

Contact email address \_\_\_\_\_ (in case of cancellation of the club on the day)

Contact email address \_\_\_\_\_ (in case of cancellation of the club on the day)

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

Please enroll \_\_\_\_\_ in \_\_\_\_\_ (Day) \_\_\_\_\_

(circle the type of payment: cheque/cash) Amount paid: \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_