

# TREP\$

## REGISTRATION FORM

Please return by Friday, February 17th, 2017

Student Name \_\_\_\_\_ Teacher \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

- My child will participate in after-school Workshops AND TREP\$ Marketplace.

**Volunteerism:** Are you available to help with this program? Check all that apply.

Volunteer's Name: \_\_\_\_\_

- Marketplace (helping the night or day of the Marketplace itself)
- Workshop (helping at one or more of the Workshops)
- Small Business Mentor (parents with small business experience provide business feedback to children at Workshop III) - March 23rd
- Public Relations/Marketplace Advertising (handing out flyers/posting signs)

### Dismissal Information

- I will be picking up my child from the TREP\$ Workshops.
- My child will be returning to the after-school care following the TREP\$ Workshops.
- \_\_\_\_\_ has my permission to pick up my child from the TREP\$ Workshops.
- My child can walk home by themselves.

### Photographic Release:

- I give permission for photographs of my child to be used in press releases and all forms of media for advertising and marketplace promotion to TREP\$ ED LLC.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

The Registration fee is \$20. Please make check out to 'Hillside PTA' and submit in an envelope marked TREP\$.