



Registration and Permission page 1 of 2

Student Name: _____ Grade: _____

Parent / Guardian Name: _____

Address: _____

Phone #1: _____ Phone #2: _____

E-Mail: _____ School: _____

List any medications, dietary restrictions or other considerations that Center staff should be aware of:

Emergency Contact Name: _____ Relationship: _____

Phone(s): _____

Check the program(s) that you are registering for below. Registration is on a first-come, first served basis. To reserve your child's place, send a check or credit card payment information and this **2-page registration form** to the Center for Architecture Foundation, 536 LaGuardia Place, NY, NY 10012; 212-696-5022 fax. A confirmation letter will be sent upon receipt. Some scholarships are available; please call for information.

✓	Dates	Program	Cost/student	Quantity	Total
	July 6 –10	Secret Places: gr. 7 – 9	\$400		
	July 13 – 17	Calling SoHo: gr. 7 - 9	\$400		
	July 27 – 31	Design/Build: gr. 9 - 12	\$400		
	Aug. 3- 7	Pop Art & Arch: gr. 3- 6	\$400		
	Aug. 10 – 14	Secret Places: gr. 3 - 6	\$400		

Total Enclosed: _____

Checks payable to "Center for Architecture Foundation." To pay by credit card, complete this section:

Card type: AmEx MasterCard Visa Discover	Expiration Date: _____
Credit Card Number: _____	Security Code (Visa/MC): _____
Card Holder Name: _____	Amount Authorized: _____
Billing address (if different from above): _____	
Signature: _____	Date: _____



Summer@theCenter Rules & Policies

- Students are expected to treat each other and all staff with respect, and to follow the group instructions and activities.
- Students whose behavior disrupts the program or jeopardizes the safety of any member of the group will be given a warning and parents will be notified. If behavior does not improve, the Center for Architecture Foundation reserves the right to dismiss the student from the program.
- Tuition is non-refundable.

By this permission slip the undersigned hereby acknowledges and agrees that my child, _____, may participate in the summer school break programs at the Center for Architecture, located at 536 LaGuardia Place, New York. To the fullest extent permitted by law, the undersigned also releases and discharges the Center for Architecture Foundation, the New York Chapter of the American Institute of Architects, Inc. and any other related entities or affiliates, from any and all liability related to any injury, illness, or death or any loss or damage to any personal property that my child may suffer or sustain while en route to the Center for Architecture, while on any trips associated with the course and while at the Center for Architecture.

I also give permission to the Center for Architecture Foundation to take photographs of my child while he/she is engaging in the Center for Architecture Foundation's workshops, and grant the right to edit, use and re-use said products for any and all educational, public service or not-for-profit purposes selected by the Center for Architecture Foundation. I release any and all rights, titles and interest my child or I may have in said photographs, movies, video tapes, web-site productions, finished pictures, reproductions, copies or negatives of the same in connection with such uses.

I have read the above and agree to the terms and conditions:

Parent/Guardian Signature: _____ Date: _____