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| holaspanishclasses.com  patricia@holaspanishclasses.com  416-884-7145 |

# Student Application Form

## Student

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | DOB: | M F |
|  | Last | First M.I. |  |  |  |

|  |  |
| --- | --- |
| Address: |  |
| \_\_\_ | Street Address |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | Province | Postal Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

## Parents

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Mother’s Full Name: |  |  |  | ­­­­ |  |
|  | Last | First | M.I. |  | *Phone* |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Father’s  Full Name: |  | |  |  | | ­­­­ |  | |
|  | Last | | First | M.I. | |  | Phone | |
| Emergency  Contact’s Name |  | |  |  | | ­­­­ |  | |
|  | Last | | First | M.I. | |  | Phone | |
| Signature: | |  | | | Date: | | |  | |

**This month I am choosing:**

**1 class/week** = $25 x 4 weeks = $100 x 1.13 HST = **$113**

**2 classes/week** = $45 x 4 weeks = $180 x 1.13 HST = **$203.40**

**3 classes/week** = $65 x 4 weeks = $260 x 1.13 HST = **$293.80**

**Tutoring** = $300 for 10 classes = TOTAL x 1.13 HST = **$339**

We take payment via:

1. email transfer to [**patricia@HOLASpanishClasses.com**](mailto:patricia@HOLASpanishClasses.com)
2. cheque made out to Hispanic Open Learning Academy through the mail
3. the Buy Now button on the website <https://www.holaspanishclasses.com/> to pay by credit card or PayPal.





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# Media Consent Form

As a growing Spanish Program, Hispanic Open Learning Academy (HOLA Spanish Classes), is building memories with its students, parents, teachers and volunteers. Your child may be interviewed, photographed, or videotaped during activities for educational and marketing purposes. The student’s name (your child) or image might appear in HOLA marketing or media publications (print or digital) or broadcasting events. HOLA requires a signed consent from you waiving any right to approve the use of these recordings and pictures now or in the future, whether the use is known or unknown. Also, you waive any right to any royalties related to the use of these materials published in print or electronic form on the internet or in other publications outside of HOLA’s control. You agree that you will not hold HOLA responsible for any harm that may arise from such unauthorized reproduction.

I consent to my child being photographed, videotaped, audiotaped or interviewed and their name and image or work used in HOLA facilities, publications and media coverage for the purposes of promoting and celebrating the successes and achievements of students. I understand that this coverage may be in print form (e.g. posting in schools, pamphlets or newspapers) and/or electronic form (e.g. newsletters, audio/visual productions, web postings, and social media such as Mail Chimp, Instagram, YouTube, Facebook or Twitter).

I do not consent to my child being photographed, videotaped or interviewed.

Student Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The personal information on this form is collected under the authority of the Education Act and will only be used for the purpose of allowing photos, videos, and interviews of students.



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# Policies and Liabilities

**Registration Policy**

By registering your child, you will give up legal rights, including the right to sue

Hispanic Open Learning Academy (hereinafter “HOLA”) for any accident or injury arising out of participation in any activity of HOLA Spanish classes.

**Assumption of Risks, Release of Liability, Waiver of Claims and Indemnity Agreement**

|  |  |
| --- | --- |
| I understand and accept the risk associated with all HOLA activities, including the possibility of physical or emotional injury, and property damage. I understand that this agreement applies not only to use of the tools and equipment to create arts and crafts, and other activities, including playing, singing and acting during class. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. Specific risks of the activities include: cuts and contusions, sprains and muscle and joint strains, broken bones, burns, equipment failure, equipment fall, and fall of the participants. HOLA seeks to create a safe environment, but the unexpected might occur. HOLA may not know the health or abilities of a participant. **I ACCEPT AND VOLUNTARILY ASSUME ALL THE RISKS ASSOCIATED WITH THE ACITVITIES OF HOLA AND I CHOOSE TO PARTICIPATE DESPITE THESE RISKS.** |  |

1. I am signing this Agreement on behalf of my child, I confirm that I have assessed the risks associated with HOLA activities, in light of the specific abilities and circumstances of my child, **and I VOLUNTARILY ALLOW MY CHILD TO PARTICIPATE** in any HOLA activities despite the risks. I therefore agree that if my child is injured during HOLA activities, I will accept all responsibility and liability for such injuries.
2. I confirm that I have read or heard or seen the rules governing my or my child’s participation in any HOLA activity. I understand that HOLA’s rules have been implemented for the safety of all participants, and I have explained the rules to my child. I understand that my or my child’s failure to follow HOLA’s rules could result in damage, expense, injury, or death. I acknowledge that my or my child’s failure to follow the rules could result in expulsion from HOLA classes.
3. I agree to **GIVE UP MY RIGHT TO SUE HOLA** and its directors, officers, employees or agents for any damage, expense, physical or emotional injury, paralysis, or death that I or my family or estate may suffer as a result of my participation in any HOLA activity, DUE TO ANY CAUSE WHATSOEVER, including HOLA’s negligence, the failure to warn or protect me from risks, breach of contract, breach of any other duty of care, or breach of the Occupiers’ Liability Act, R.S.O. 1990, c. O.2. I agree to waive any and all claims that I have or may have in the future against HOLA and its directors, officers, employees or agents and to **RELEASE HOLA and its directors, officers, employees or agents FROM ANY AND ALL LIABILITY** for any damage, expense, injury, or death.
4. I also agree to hold harmless and indemnify HOLA and its directors, officers, employees or agents from any and all liability for any damage, expense, injury or death caused to any third party as a result of my child’s participation in HOLA activities.
5. I agree that if any portion of this Agreement is found to be void, unenforceable, or inapplicable, the remaining portions shall remain in full force and effect.
6. If I am signing this Agreement on behalf of a child, I confirm that I am the child’s parent or legal guardian, or that I otherwise have legal authority to sign this Agreement on behalf of the child.
7. I confirm that have read or have had sufficient opportunity to read this entire Agreement, have understood the terms of this Agreement, and AGREE TO BE BOUND by the terms of this Agreement.

**Refund Policy**

You will not be refunded if:

1. You decide to withdraw your registration within a week of the program start date.
2. The student does not continue in the program for any reason.
3. HOLA decides that the student should not continue, as a consequence of force majeure or exceptional circumstances, including bad and/or aggressive behaviour by the student. HOLA does not tolerate bullying.
4. There is a class cancellation due to an extenuating circumstance, such as extreme weather conditions or power failures.

**General Policies**

1. HOLA reserves the right to combine or cancel classes due to low enrolment. All students will be notified in advance, and refunds issued if necessary.
2. There are no classes on all statutory holidays. HOLA will remind you prior to a long weekend.
3. If a student will be absent, please email patricia@holaspanishclasses.com as soon as possible, preferably at least 24 hours prior to the class, so the teacher is aware.
4. HOLA is not obligated to provide additional classes due to student absence. Classes cannot be prorated or credited for missed classes or carried over to following sessions. Make-up classes may be offered at the discretion of the teacher.
5. We screen for viruses but cannot guarantee use of HOLA’s website and any downloads or video interactions are malware-free and we are not responsible for any damage this may cause.

Student Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name (Please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_