



**Spanish After-School Program**  
**At Shallowford Falls E.S. for K-5th Grade Students**  
**Register Now for Fall 2018**

Due to the high level of interest, enthusiasm and student participation, we are thrilled to continue our Spanish enrichment after-school program! We are a well-established, Cobb County foreign language enrichment program. Classes are taught by creative and enthusiastic Spanish teachers. We create a productive and fun learning environment, where the children have an opportunity to build a strong vocabulary in different units and establish basic language skills. Children previously enrolled in the program will be introduced to new content and challenged with new curriculum. We offer classes for beginners, intermediate and more advanced students. We provide needed materials and supplies for all students.

**Days:** Thursdays / 1 hour per week at Shallowford Falls E.S.

**Dates:** August 16<sup>th</sup> - December 6<sup>th</sup>. We will not have classes during Fall Break, October 11<sup>th</sup> (Early Release Day), Conference week, and Thanksgiving Break.

**Time:** 2:30 pm to 3:30 pm at Shallowford Falls E.S.

**Registration starts on May 20th and ends on 8/9/18**

**Cost:** \$225.00 - payable to Spanish Now ASP

Please mail your registration form and full payment to:

Spanish Now ASP c/o Araceli Garza  
 4335 Granby Way  
 Marietta, GA 30062

**On-line registration is also available at [www.spanishnowasp.com](http://www.spanishnowasp.com)**

**Shallowford Falls Elementary School**

**Child's Name:** \_\_\_\_\_

**Grade for 2018/2019:** \_\_\_\_\_ **classroom teacher name** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **cell phone #** \_\_\_\_\_

**Home address:** \_\_\_\_\_

\_\_\_\_\_

**Email address:** \_\_\_\_\_

**Please indicate allergies or medical concerns of which we should be aware:**

\_\_\_\_\_ **Epipen: Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Please circle the # of sessions your child has participated in our Spanish program. 0, 1, 2, 3+**

For questions, please contact Araceli Garza at [aragarza1@gmail.com](mailto:aragarza1@gmail.com) or [www.spanishnowasp.com](http://www.spanishnowasp.com)

\*\* Placement in the Spanish class is based upon a "first-come first-served" basis. I understand that my check for registration will reserve my child's placement in the class. **I understand that no refunds will be granted after 8/9/18** \_\_\_\_\_ **(Parent initials)**

\* \*I agree to have my child, \_\_\_\_\_, participate in the Spanish after-school program.

\*\* I understand and I agree to have my child enrolled in the school's ASP, in order to participate in the Spanish program. (This is for the safety of every child we enroll, if you should be unexpectedly delayed and unable to pick your child up from Spanish at 3:30 pm.)

\*\* I hereby agree to release and hold harmless Shallowford Falls Foundation, its officers, trustees and Spanish Now ASP, LLC, and representatives, from any responsibility, loss, liability, damage or costs which Participant may incur in this after-school program weather caused by the negligence of SFF or Spanish Now ASP, LLC, the negligence of Participant and/or others due to accidental occurrences in the case of injury or medical emergency involving Participant, if a parent or guardian cannot be reached, I give the Spanish Now ASP, LLC program representative(s) permission to seek appropriate first aid or medical care and I agree to be fully responsible for any cost incurred.

\*\* I understand that the Spanish program will follow my child's elementary school administrative policy for school cancelations and make-up days. \_\_\_\_\_ **(Parent initials)**

\*\* Following Spanish class, my child will go to ASP \_\_\_\_\_ OR my child will go in carpool \_\_\_\_\_

**Parent/guardian signature in agreement with above:** \_\_\_\_\_ **Date** \_\_\_\_\_

*Spanish Student Today. Global Citizen Tomorrow.*