



**Spanish After-School Program**  
**At Timber Ridge E.S. for K-5th Grade Students**  
**Register Now for Spring 2019**

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.

**Schedule Options:** 2:30pm to 3:30pm at Timber Ridge (check one option below)

1. 1<sup>st</sup> - 2<sup>nd</sup> grade class; Mondays and Wednesdays; each class 1 hour / 2 days a week; \$350 \_\_\_\_\_
2. 3<sup>rd</sup> -5<sup>th</sup> grade class; Mondays and Wednesdays; each class 1 hour / 2 days a week; \$350 \_\_\_\_\_
3. Kindergarten and 1st grade class; Wednesdays; 1 hour each class / 1 day a week; \$200 \_\_\_\_\_  
 (\$30 discount **only** if you are registering 2 or more siblings **both twice** a week)

**Dates:** January 23<sup>rd</sup> - May 1<sup>st</sup>. We will not have classes during February Break, March 13<sup>th</sup> (Early Release Day), and Spring Break.

**Registration is NOW OPEN** and will close on 1/16/19

Checks 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)**

**Timber Ridge 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 1/16/19 and there is a \$25 cancellation fee** \_\_\_\_\_ **(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 3:30pm.) \_\_\_\_\_ **(Parent initials)**

\*\* I hereby agree to release and hold harmless Timber Ridge 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 TRF 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 \_\_\_\_\_ **(Parent initials)**

\*\* Spanish Now ASP, LLC reserves the right to rearrange the classes according to the registration turn out and ability of the students \_\_\_\_\_ **(Parent initials)**

\*\* I understand that the Spanish program will follow my child's elementary school administrative policy for school **cancellations 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 all of above: \_\_\_\_\_ **Date** \_\_\_\_\_

*Spanish Student Today. Global Citizen Tomorrow.*