

SWEDISH LANGUAGE AND CULTURE SCHOOL OF MICHIGAN

APPLICATION FORM

The Swedish Language and Culture School of Michigan admits students of any race, color, and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, and ethnic origin in administration of its educational policies, admissions policies, or extracurricular and other school-administered programs.

STUDENT INFORMATION	
CHILD 1	
NAME:	DATE OF BIRTH (YR/MO/DY):
SWEDISH PERSON NUMBER:	GRADE:
CHILD 2	
NAME:	DATE OF BIRTH (YR/MO/DY):
SWEDISH PERSON NUMBER:	GRADE:
CHILD 3	
NAME:	DATE OF BIRTH (YR/MO/DY):
SWEDISH PERSON NUMBER:	GRADE:

PARENT INFORMATION	
NAME (MOTHER):	CITIZENSHIP:
SWEDISH PERSON NUMBER (IF ANY):	
ADDRESS:	
CITY:	STATE AND ZIP CODE:
CELL PHONE:	EMAIL:
NAME (FATHER):	CITIZENSHIP:
SWEDISH PERSON NUMBER (IF ANY):	
ADDRESS (IF DIFFERENT FROM MOTHER):	
CITY:	STATE AND ZIP CODE:
CELL PHONE:	EMAIL:
EMERGENCY CONTACT INFORMATION	
NAME:	CELL PHONE:
RELATIONSHIP TO STUDENT:	

ALLERGIES
LIST ALL ALLERGIES:
NO ALLERGIES:

MAIL APPLICATION TO: ÅSA ARCHER; 3501 WHITE OAK DRIVE; HIGHLAND, MI 48357
 EMAIL A SCANNED COPY OF APPLICATION TO: ÅSA ARCHER; ASACARCHER@GMAIL.COM

MEDIA RELEASE

I permit the Swedish Language and Culture School of Michigan to record a photographic image and/or audio or video of my child/children for educational, academic, or research purposes. If the board members or teachers of the Swedish Language and Culture School of Michigan judges that education or research may benefit from the use of the photographs and/or recordings, the Swedish Language and Culture School of Michigan may publish or sell (not for profit) them for academic purposes, or use them in any other professional manner that the Swedish Language and Culture School of Michigan believes is proper, including, but not limited to: print publications, video streaming, podcasting, and broadcast media. I understand that the pictures and recordings belong to the Swedish Language and Culture School of Michigan, and I will not receive payment or any other compensation in connection with the pictures and recordings. I have had a chance to discuss this form with the Swedish Language and Culture School of Michigan staff and have received complete answers to all my questions. I release the Swedish Language and Culture School of Michigan from any and all liability that may or could arise from taking or use of the pictures and/or video of my child/children.

I GIVE PERMISSION TO USE IMAGES:

I **DO NOT** GIVE PERMISSION TO USE IMAGES:

PARENT OR GUARDIAN:

SIGNATURE:

DATE:

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In Consideration of being permitted to participate in the Swedish Language and Culture School of Michigan and related activities at the Swedish Club, 22398 Ruth Street, Farmington Hills, MI 48336 the undersigned, for himself/herself, his/her children, personal representatives, heirs and next of kin, hereby releases, waives, discharges and covenants not to sue the above party, and the owners and operators of the Swedish Language and Culture School of Michigan and their respective agents, employees, officers, members, and participants from all liability to the Undersigned, his/her children, his/her personal representatives, assigns, heirs and next of kin, for any and all loss or damage, and claim or demands therefore on account of injury to the person or property of the Undersigned and his/her children, whether caused by the negligence of the Releasee or otherwise while the Undersigned is involved in the Swedish Language and Culture School of Michigan activities or is on the premises of the above party. Further, the Undersigned **HEREBY AGREES TO INDEMNIFY, SAVE AND HOLD HARMLESS** the Releasee from any loss, liability, damage, or cost they or their children may incur due to the participation of the Undersigned in the Swedish Language and Culture School of Michigan and related activities or during the presence of the Undersigned and his/her children on the premises of Releasee. The Undersigned **HEREBY ASSUMES ALL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DISABILITY, DEATH OR PROPERTY DAMAGE** due to the negligence of Releasee or otherwise while in or upon the premises of Releasee. **THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT** and further agrees that no oral representations, statements or inducements apart from the foregoing written agreement have been made. This agreement shall continue in force and effect for as long as the Undersigned's participation on the properties above shall continue.

PARENT OR GUARDIAN:

SIGNATURE:

DATE: