

Hanley Chess Academy

Presents





| Name of Student: | |
|--|--|
| Parent/Guardian Name: | |
| Contact Phone:/ | |
| Emergency Contact Person & Phone Number: | |
| Email: | |
| Mailing Address: | |
| 30, February 6, 13, 20, 27, March 6, 13, 20, 27, April | vice): Thursdays 4pm-5:15pm. Dates: January 9, 16, 23, 13, 10, 17, 24, May 1, 8, 15, 22, 29. 1 absence is allowed es. \$630. Homework: \$35 for 2 books. Tournaments: 4 ee: \$770. No refunds once session begins. |
| signed copy of this document. Please note the inform | O of hanleychessacademy@gmail.com. Please include a nation above is being asked for in order to file it with the e this mandatory as they need to keep track of how many |
| Waiver (Required by Great Park Neighborhood registration using this form, the GPN requires each part of the property of the pr | for registration to be accepted): Along with your arent to fill out the waiver at the following link. |
| https://form.jotform.com/GreatParkNeighborh | oods/waiver-and-release-of-liability-for |
| | |
| Parent Signature | // |