

Wilderness Way School

220 Ballou Road, Owego, NY 13827
(607) 972-6512

Email: caretaker@wildernesswayschool.com
Webpage: www.wildernesswayschool.com

Class Registration Form

Class Number: _____ Class Date(s): _____
Class Name: _____

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Birthdate: _____ Phone Number: () _____
Email Address: _____

Emergency Contact Information:

Contact Name: _____ Relationship: _____
Address: _____
Home Phone: () _____ Work Phone: () _____

Payment Information: Make checks payable to **Wilderness Way School**

A nonrefundable portion of the class tuition, is the minimum amount to be submitted with this form. The nonrefundable amount is 50% of the class tuition, or \$50, whichever is less. The balance of the tuition (if full payment not made initially) is due in full prior to the first day of class, otherwise attendance will be denied. If class is already filled upon application arrival, or if the school cancels the class, all registration fees will be returned in full. Once registered, if a student cancels their enrollment all fees in excess of the nonrefundable amount will be returned.

Payment History (do not write, office use only):

Class Tuition: _____ Amount submitted with application: _____ Balance due: _____
Application receive date: _____ Payment method: _____ Check No: _____
Balance rcv. date: _____ Payment Amt: _____ Payment method: _____ Check No: _____

Waiver and Release: (Forms not signed and dated will be returned)

I, the undersigned, do hereby state that I am fully aware that primitive skills, tracking, and nature awareness training, under the safest possible conditions may be dangerous, and hereby agree to accept full responsibility and assume all risks, and release the Wilderness Way School, and their agents, from any claims resulting from any injuries I might receive. Additionally, I agree to obey the rules and regulations that the Wilderness Way School puts into effect to minimize these risks.

My signature below indicates my acceptance of these terms.

Applicant Signature _____ *Date:* _____