

## Budget or Bust Registration

Grades 6<sup>th</sup> to 12<sup>th</sup>

Registration deadline is June 29<sup>th</sup>.

**Please circle one:**

**(All sessions will be**

**9:00 am - 12:00 pm)**

Grades 6<sup>th</sup> – 8<sup>th</sup> : **Monday, July 15<sup>th</sup>**

Grades 6<sup>th</sup> – 8<sup>th</sup> : **Monday, July 22<sup>nd</sup>**

Grades 9<sup>th</sup> – 12<sup>th</sup> : **Tuesday, July 16<sup>th</sup>**

Grades 9<sup>th</sup> – 12<sup>th</sup> : **Tuesday, July 23<sup>rd</sup>**

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
(one form per child please)

Parent/Guardian Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone (s): \_\_\_\_\_

Food Allergies:  Yes  No – if yes, please list: \_\_\_\_\_

Person(s) Who May Pick Up Child: \_\_\_\_\_

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

First Family Federal Credit Union (FFFCU) has permission to photograph/film minor designated above for any lawful purpose associated with the Budget or Bust program.

Consent & Release: \_\_\_\_\_ may participate in Budget or Bust program at First Family Federal Credit Union (FFFCU). I hereby authorize the employees of FFFCU to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release said employees and FFFCU from any and all liability for any injuries and illnesses incurred in relationship to the above event. I agree that I will be notified if my child is disruptive and does not respect the classroom setting.

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date