

SEW TEACH ME™

Free Sewing classes for kids, ages 9-15
Visit SewTeachMe.org for more information

Student Registration Form

Date of application: _____

Student Name: _____ Age: _____
(Please Print)

Address: _____

Parent/Legal Guardian: _____
(Please Print)

Parent/Guardian Email Address: _____

Parent/Guardian Phone: _____

Which class schedule do you prefer? Students generally come for 4-5 classes.

_____ Wednesdays 3:00-5:00 _____ Saturdays 1:00-3:00 (1st and 3rd Saturday of the month only)

_____ Either, we are flexible

For parent/guardian to read and sign:

I give my permission for (print student name) _____ to take sewing lessons with Sew Teach Me.

I agree to:

- Drop off my child promptly for class
- Pick up my child promptly when class is finished (or call the mentor in case of an emergency)
- Call the mentor if my child will be absent for a session

Assumption of Risk: I understand that the instruction provided by **SEW TEACH ME** may include activities that may be hazardous to my child, including, but not limited to, use of scissors, rotary cutters, irons and electric sewing machines. I agree to hold **SEW TEACH ME**, its Directors and Mentors harmless from claims or negligence, liability or expense of medical treatment for any injuries my child receives while participating in this program. I agree to allow **SEW TEACH ME** to share my telephone and email information with my child's mentor, for the purpose of communication.

Parent/Guardian Signature: _____ Date: _____

Parents must return a signed form before a match can be made.

**** Please scan the completed form (or take a photo) and send to SewTeachMeBend@gmail.com ****