

Roxbury Community School – Registration Form

Participant Information:

Name (First and Last): _____ Sex (M or F): _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (H) _____ (C) _____ (W) _____
 Email Address: _____
 Special Accommodations: _____
Course Title: _____ **Start Date:** _____

Parent/Guardian Information (if participant is 18 and under):

Name (First and Last): _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (H) _____ (C) _____ (W) _____
 Email Address: _____

Payment Method:

Please send this form and payment and make checks payable to the Roxbury Community School (42 North Hillside Avenue, Succasunna, NJ 07876). Please write "COURSE NAME" in the memo line. Payment is needed prior to the start of class.

Cash Credit Card (If paying via Credit Card complete section below)
 Cardholder Name: _____
 Check (see line below) Account Number: _____
 Check # _____ Expiration Date: _____ CCV # _____
 Total Amount Due: _____ Signature/Date: _____

Please initial in each box to the right acknowledging agreement and understanding.

<p>DISCLAIMER/REFUNDS: A receipt may not be given when registering. You may assume your registration has been received unless notified. There are no refunds once the program begins. All cancellations must be received in writing at least seven days prior to the start of the class for a refund. After that date, there will be no refunds. There is a \$35 service charge for returned checks. Participation in Community School activities is at your own risk. The Roxbury Township Board of Education assumes no liability. To read the full Roxbury Community School policy, please visit www.roxbury.org/RCSpolicies.</p>	
<p>BEHAVIORAL ISSUES: Roxbury Community School reserves the right to dismiss an individual from a program because of behavioral issues. No refunds will be issued.</p>	
<p>SOCIAL MEDIA: During Community School programs, arrangements are made to take pictures, video, or live-post to social media sites. School personnel, a media student or a newspaper photographer may obtain content for use in local media, on the district website, student publications/outlets to showcase the wonderful things happening within the district. The participant's name may be included, especially in a caption of a picture containing their likeness. By completing this form, participation is implied.</p>	
<p>COVID-19 DISCLAIMER: Participants will need to complete a Daily Health Screening form stating they are not experiencing any COVID-19 related symptoms at each session. Participants will need to follow social distancing and mask guidelines while on district premises.</p>	

How did you hear about this program? Check all that apply.

Email Website What's Happening E-Blast Newsletter Other, please specify _____
 Facebook Weekly Roxbury School's E-Blast Newsletter
 Flyer Word of Mouth
 Newspaper Past Participant

Would you like to be added to the Roxbury Community School email contact list announcing different programs and trips? Yes No

Confirmations will be sent via email only. Mail this registration form and checks/cash to Roxbury Community School at 42 North Hillside Avenue, Succasunna, NJ 07876. There are no refunds once the program begins. Participation in Roxbury Community School activities and trips is at your own risk. The Roxbury Township Board of Education assumes no liability. Credit card payments will be processed within 72 hours of receipt. By completing and submitting this form with the credit card information, you authorize the Roxbury Community School to make a one-time electronic payment to your credit card. This permission is for this transaction only and does not provide authorization for any additional unrelated credits to your account. For more information, visit www.roxbury.org/RCS, email comschool@roxbury.org, or call 973-584-7699.