



"Knowledge is Power!"

Enrollment Form for Children & Teenagers
WE **DO NOT** SHARE YOUR INFORMATION WITH ANYONE.

Enrollment priority is based on the order in which **Enrollment forms and payments** are received.

A separate form is required for each student.

Student's Full Name _____

Mailing Address _____

Age _____ Gender (circle one) M F

School _____

Name(s) of Parent(s) / Guardian(s) _____

Telephone Number (____) _____

Person to contact in case of an **emergency** _____

Telephone **Number** (____) _____

PROGRAM NAME/ TUITION:

_____ \$ _____ Date of the Program _____

One student \$ _____ (USD) per student

Two students from the same family \$ _____ (USD) per student

Please list any foods that your student is allergic to in order for us to accommodate specific needs. (**Only for students in programs with luncheon or dining tutorial**; otherwise, state that an item is not applicable with "N/A".)

PAYMENT METHOD: (Check one)

Check / Money Order. Make payable to: **Universal Etiquette**

The filled out **forms and checks/money orders** may be sent:

*Universal Etiquette
P.O. Box 3023
Glendale, CA, 91221*

□ Online *Credit Card* or via *PayPal* Check Out. **Payment Instructions:**

Go to www.UniversalEtiquette.com. From the **Enrollments Forms** dropdown menu on the right side of the screen choose **How To Pay Online**. A new page will open. From the **Programs** dropdown menu, choose a desired program. Then enter the participant's name in the box. If you are paying for two participants, enter the second participant's name. Click on the **Continue** button.

You will be directed to the PayPal secure Web site. In the **Description** box, provide the date of the chosen program. Below the box, under **Options**, you will see the name of your chosen program and the participant(s) name(s). Please provide the agreed amount in the **Item Price** box and click on the **Update** button. If you are paying for more than one participant, please enter the total amount, skip the quantity, and click on the **Update** button.

If you would like to pay with your PayPal, log in into your account and follow the steps.

If you would like to pay with a debit or credit card, click on **Don't have a PayPal account?** A new page will open with the usual payment requirements.

After finishing this step, please, do not forget to print you receipt.

The filled out **forms** and **checks/money orders** may be returned:

By mail: *Universal Etiquette*
 P.O. Box 3023
 Glendale, CA, 91221

The filled out **forms** may be returned:

By e-mail: info@UniversalEtiquette.com

By Fax: 1818-221-0272

Postponements/ cancellations must be received 24 hours prior to the day of the program or participant(s) are liable for the entire fee.

If the program is cancelled by Universal Etiquette, a full refund will be returned via its original form of payment in five days.

The tuition fee is tax deductible.

Participant _____ Date _____

For office use only: Program Enrollment Form and Tuition Received on this date: _____

Notes _____



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Health and History Form

Required to be filled out with the Enrollment Form for Children and Teenagers
(Confidential)

Name of Student _____
Date of Birth _____ Gender (circle one) M F
Person to contact _____
Physician's Name _____
Physician's Phone Number _____
Please list any medications your child is now taking and the reason for the medications: _____

Has your child had any of the following? :	Yes	No
1. History of heart problems?	___	___
2. High blood pressure?	___	___
3. Asthma?	___	___
4. Stroke?	___	___
5. Surgery within the last six months?	___	___
6. A chronic illness?	___	___
7. History of lung problems?	___	___
8. Diabetes?	___	___
9. History of heart problems in immediate family?	___	___
10. Allergic to any foods?	___	___

(If the answer to any question is "Yes", please provide complete details on the back of this form.)
Please list any foods that your child is allergic to in order for us to accommodate specific needs during our programs

I hereby certify that the foregoing information is true, correct and complete.

Parent or Guardian's Name (Print)

Signature

Date

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FILM AND PHOTOGRAPHY RELEASE FORM

In the event that there is either any print or electronic media coverage during the program I will be attending, *Universal Etiquette* is hereby granted permission to use any photograph or video of likeness of mine in any manner, without obtaining subsequent permission or consent and without payment of further consideration. I agree to defend, indemnify, and hold *Universal Etiquette* harmless from and against any claim, demand or cause of action that I may make because of use of any such photograph or likeness in any manner.

Student's Name

Date

Parent or Guardian's Name

Signature

Home Address

Telephone Number



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CONSENT TO PUBLISH PHOTOGRAPH ON

Universal Etiquette WEB SITE

STUDENT'S NAME _____

I hereby give my permission to *Universal Etiquette*, to publish a photograph of my child on its web site. I understand that information on the World Wide Web, including photographs, are accessible to persons throughout the world with access to the internet. The photograph published on the web WILL NOT have any person identified by name.

Parent or Guardian's Signature

Date