



Cash or Check

Check #: _____

- Please return no later than September 3, 2011 to be included in the membership directory
- Membership fee is \$35 plus nursery fees made payable to NDECPTA (nonrefundable).
- Mail check and form to: Jeni Smith, 4006 Walnut Hill Ln, Dallas, TX 75229

1) Member Information:

Name _____ Birth Date _____ Spouse's Name _____

Address _____ Zip Code _____

Home Phone _____ Cell Phone _____ E-mail _____

2) Children:

<u>Name</u>	<u>Day Out Program/Preschool/Daycare</u>	<u>Birth Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

3) If you are expecting, please tell us your due date: ____/____/____

4) New Member **Returning Member** (Check one please)

Newsletter Q&A Spotlight Questions Throughout the year, we will spotlight various members in our newsletter. Please check "NO" if you do not want to be spotlighted in the newsletter: NO

Hometown _____ Favorite hobby _____

Favorite place to take my kids _____ Favorite date spot _____

College attended _____ How long have you been married? _____

On Saturdays, you find me _____ Favorite book/magazine _____

I met my spouse _____ Pet peeve _____

Working? Yes No Career _____ Favorite movie _____

I'm famous for doing this _____ Dream vacation spot _____

If you wish to use the nursery service during our monthly meetings, please complete the reservation form and waiver on back →

NURSERY REGISTRATION FORM 2011 – 2012

Nursery reservations may be made by the month or year. Take advantage of this discount and save yourself a monthly reservation call by paying the year in advance now. Yearly fees are \$45/child or pay \$10/monthly meeting/child. Monthly reservations must be made in advance of each meeting. Drop-in children cannot be accommodated. Fees are nonrefundable.

Member's Name _____

Child's Name _____ Birth Date _____ Age on Sept 1 _____ Total \$ _____

Child's Name _____ Birth Date _____ Age on Sept 1 _____ Total \$ _____

Child's Name _____ Birth Date _____ Age on Sept 1 _____ Total \$ _____

Please list any allergies that your child(ren) have of which we should be aware:

Total Nursery Fees: \$ _____
--

North Dallas Early Childhood PTA (NDECPTA) ■ Waiver of Liability Agreement

I, the undersigned, as the parent, sole managing conservator, joint managing conservator, or legal guardian, and acting on behalf of and with the authority of any other parent, guardian, or legal representative of (list names of children) _____ (hereinafter referred to as "the child/children") hereby agree to irrevocably and unconditionally release and waive any and all claims and causes of action, of injury, death, or property damage (statutory or at common law) that I or the child/children may have against NDECPTA, its officers, directors, agents, employees, instructors, or volunteers that arise out of or in connection with the provisions of baby-sitting or nursery services by the NDECPTA. I understand and accept that the safety of the children and screening of the sitters is the responsibility of every member of NDECPTA. I understand and agree that the officers, directors, agents, employees, instructors, or volunteers are not guarantors of the health and safety of the children. I do, however, acknowledge that because of my relationship to the child listed herein above, the ultimate safety of the child is my sole responsibility. I understand and agree that during NDECPTA events and activities, I will remain on the meeting premises in order to adequately supervise the child. I understand the nursery is for the sole purpose of child watch during the duration of the meeting only.

I understand and agree that these claims are released and waived regardless of any cause or of any fault or negligence of NDECPTA, its officers, directors, agents, employees, instructors, or volunteers. As part of the consideration for the child/children being allowed to participate in the babysitting or nursery services of NDECPTA, I hereby personally assume all risks in connection with the child/children's participation in said baby-sitting and nursery services of NDECPTA. I fully understand and accept that NDECPTA is a non-profit, volunteer organization for the benefit of its members.

I hereby give my consent for NDECPTA to use my photograph and likeness to be used in its publications, including its website. I release them from any expectation of confidentiality for the undersigned minor children and myself.

I understand and agree that I am executing this document voluntarily and without duress from any person; that no representation by any person acting on behalf of the NDECPTA has influenced or induced the execution of this document; that I have carefully read and understand this document; that I am not under the influence of any substance nor under any mental incapacity that would affect me at the time of signing, and that I am aware of the consequences of the execution of this document.

Signature

Printed Name

Date