



# Kids Safety Program Registration Form

## Kids Safety Program Registration Form

**Contact Name:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Grades:** \_\_\_\_\_ To \_\_\_\_\_

**Approx. Number  
of Participants:** \_\_\_\_\_

**Program Length:**  1 Week  2 Weeks  3 Weeks

**Preferred Start  
Date:** 1st Choice: \_\_\_\_\_ 2nd Choice: \_\_\_\_\_  
mm / dd / yyyy mm / dd / yyyy

### Please Provide Additional Information Here

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CANCELLATION POLICY**

Should we need to cancel, we will work with you to reschedule the program for another date.  
If you cancel the program with less than two weeks' notice, you will be billed for 25% of the fee.  
If you cancel the program with less than one week's notice, you will be billed for 50% of the fee.

The cancellation fee is not for services to be performed after the cancellation, but is to compensate The Olympian Safety Program for reserving space for the program.



**Please Fax To: 416-848-7464**