

The Language & Cultural Club

Spanish Immersion Program for Children



The Language & Cultural Club (TLCC)

SPRING 2019 CLEMENS CROSSING ELEMENTARY SCHOOL

Why Spanish?

- Build brain power
- Practical language for daily application
- Improve cognitive skills
- Develop an authentic accent
- Embrace natural learning through immersion
- Encourage cultural sensitivity

TLCC is offering a fun and exciting After-School Program for young children to learn the Spanish language and culture through music and play-based activities. Classes are taught 90% in Spanish for novice learners. Our programs are ideal for K-4th-grade students.* Our instruction is organized by modules based on your child's age and exposure to the language rather than cumulative levels, which means that new and returning students can be enrolled in the same session.

* Fifth graders are welcome to join our classes or take Spanish with younger siblings. However, our curriculum is designed for children between the ages of 5 and 10.

Classes: Tuesdays (March 12, 19, 26, April 2, 9, 23, 30, and May 7). No Class: April 16, 2019 (Spring Break)

CCESS – Room # 164 (First Grade)

3:50 - 4:50 PM

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Tuition: \$150/per session per student - 8-week session

Discounts: Parent Volunteers receive 50% off tuition for one child** Sibling Discount: 10% off 2nd child's tuition

Online registration recommended. Enroll at: <u>https://www.t-lcc.com/registration</u> or send form to 9546 Michaels Way, Ellicott City, MD 21042. PLEASE DO NO SEND TO SCHOOL.

** If you are interested in becoming a parent volunteer, please email programs@t-lcc.com. The position will be confirmed 1 week before classes start.

| Student's Name: (last, first) | Grade: Teacher's Name: |
|---|--|
| Parent's/Guardian's Name | Parent's/Guardian's Email: |
| Parent's Cell Phone #1: | Parent's/Guardian's Phone # 2: |
| Emergency Contact: | Emergency contact phone #: |
| Allergies/medicine reactions/physical condition: | I authorize release of photos or videos of my child without identity: YES NO |
| After class, my child will go to after care in the building? YES NO | After class my child will be picked up? YES NO Authorized person to pick up your child: Name: Cell Phone # |
| Payment Information: Check # MasterCardVisa | Name on card: |
| Credit Card Number: | Billing Address: |
| Card Expiration date CCV | City State Zip Code |

I hereby grant permission for my child to participate in the above-described activity. In the event my child becomes ill or injured while participating in this activity, I hereby authorize and consent to the rendering of any reasonable emergency medical treatment due to the illness or injury stemming from my child's involvement in the activity. While the instructor and/or parent volunteer will make their best efforts to contact you or one of the emergency contacts you listed above, as quickly as possible, I understand, agree and consent to allow mergency medical treatment to be administered to my child as quickly as possible, regardless of whether I or any of my emergency contacts have been successfully contacted. In consideration of the permission granted by the Parent or Legal Guardian to allow the above mande student/bild to participate in this activity. I do hereby expressly agree, on my own behalf and on behalf of my child, to relase the instructor and The Language & Cultural Club and its officers, members, agents, representatives, contractors and volunteers from any and all liability, actions, causes of action, damages, claims, or demands of whatever kind or nature which I or the above-named child may have against, or could have against, or old have addiver bere lease voluntarily and with full knowledge of its significance. The Language & Cultural Club do not for freidness for there are inder on their activity. I have read and fully understand the terms of this Release. I hereby execute the release voluntarily and with full knowledge of its significance. The Language & Cultural Club do not offer refrands for tuition graid once a seessin has begun to the allow the area diverses availability is subject to enrollment (Minimum of 6 students, Maximum of 20). \$25 fee on all returned checks. It is your responsibility to pick up your child from the designated area at the designated end time unless other arrangements have been made

Signature:

Date: