



# Cyber Robotics Learning

## LEGO Robotics Activities & Classes

### Winter Camp Registration Form

<b>Child's Name</b>	Last:	First:
<b>Parent Name</b>	Last:	First:
<b>Child's Birth Date</b>		
<b>Entering Grade</b>		
<b>Child's School</b>		
<b>Home Address</b>		
<b>City/State/Zip Code</b>		
<b>Phone Number</b>		
<b>Email</b>		
<b>Emergency Contact Name/Phone Number</b>		

<b>Camp Information</b>	Name: Winter Camp
	Dates: _____ Time: _____
<b>Class Location</b>	

Payment of \$ \_\_\_\_\_ is enclosed.  Check# \_\_\_\_\_

Parent's Name (Please Print) \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature (I understand and adhere to all conditions set forth in this form.)

**Return Policy: A full refund will only be given if Cyber Robotics Learning is notified 30 days prior to the 1st day of the camp that the camper was signed up for. No deduction shall be allowed for late arrivals or early departures or missed days.**

Please mail your check or money order and the completed registration form to:  
Cyber Robotics Learning  
P.O. Box 8225, Saddle Brook, N.J. 07663  
[www.CyberRoboticsLearning.com](http://www.CyberRoboticsLearning.com) [cyberroboticslearning@yahoo.com](mailto:cyberroboticslearning@yahoo.com) Tel) 201-768-6111

# Cyber Robotics Learning Center

## CONSENT AND RELEASE FROM LIABILITY

I, \_\_\_\_\_, am the parent or legal guardian of \_\_\_\_\_ (“Participant”). In consideration for Participant’s participation in a Program being held at **Cyber Robotics Learning Center (P.O. Box 8225, Saddle Brook, N.J. 07663)**, I, as Participant’s parent or legal guardian, on behalf of Participant, his/ her heirs, executors, and administrators, hereby voluntarily, irrevocably, and unconditionally release and hold harmless Cyber Robotics Learning, their respective trustees, officers, employees, agents and assigns (hereinafter “Releasees”), from any and all manner of claims, actions or causes of actions, whether related to or arising from the negligence of Releasees or otherwise, arising from or in connection with Participant’s participation in the Program, including but not limited to arising from Participant’s presence on the premises of **Cyber Robotics Learning Center (P.O. Box 8225, Saddle Brook, N.J. 07663)** or the Participant being transported to or from or traveling to or from the premises of **Cyber Robotics Learning Center (P.O. Box 8225, Saddle Brook, N.J. 07663)**. This release includes but is not limited to claims of active or passive negligence, products liability, personal injury, death or damage to property or violation of any laws or regulations.

I hereby grant to Cyber Robotics Learning, to Cyber Robotics Learning’s Cooperating Entities, and to the press and media admitted into Cyber Robotics Learning Camps, Classes, or Events the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sounds (as “Works”) during my participation at the Cyber Robotics Learning Camps, Classes, or Events. I further acknowledge the Works by Cyber Robotics Learning and the Cyber Robotics Learning’s Cooperating Entities to be works made for hire, and otherwise irrevocably assign and grant to Cyber Robotics Learning and to Cyber Robotics Learning’s Cooperating Entities all rights in these Works and the right to use or sublicense these Works and my name, likeness and biography, in Cyber Robotics Learning’s discretion, in all media and in all forms and for all purposes, including without limitation, advertising and other promotions for Cyber Robotics Learning or the Cyber Robotics Learning’s Cooperating Entities, without any further consideration to me or any limitation whatsoever. It is a Cyber Robotics Learning policy not to print a minor’s name with his/her picture without specific permission from his/her parent or guardian.

\_\_\_\_\_  
Participant’s name

\_\_\_\_\_  
Parent or Guardian’s Signature

\_\_\_\_\_  
Date