

BIS AFTER-SCHOOL ACTIVITIES PROGRAM – REGISTRATION FORM

Student Name:			
Class Section:			
Parents Name:	Phone#:	Phone#:	
Parents Signature:	Alt: #:	Alt: #:	
	plete this section only if you prefer your child re reedom to switch any time they come to After-	emain in a specific activity. They will always have School Activities.	
Preference 1:	Preference 2:	Preference 3:	

BIS aims to consistently provide as many options as possible to support growing needs, interests, abilities and limitations of all our students. However, in the event that an activity experiences little or no demand, BIS may cancel and/or replace an activity with a more desirable option. More detailed information about the After-School Activities Programs is available on our website www.bis.edu.kw.