

JAMmy Night Registration Form

To register for JAMmy Night, please print and complete this form and bring it with you to JAMspace the first time you attend JAMmy Night. You will not be able to leave your children with us until we have this form on file, so thanks for remembering!



Family information:

Child's full name _____ Birthday _____
Second child's full name _____ Birthday _____
Third child's full name _____ Birthday _____
Parent's/Caregiver's name _____
Street address _____
City _____ State _____ Zip _____
Home phone _____ Work phone _____ Cell/Pager _____
Email _____
Emergency contact: Name _____ Phone _____
How did you hear about JAMspace? _____

Does your child have any allergies? _____
Does your child take any medications? _____
Please share with us anything you'd like us to know about your child:

Release from liability and negligence:

"I, the undersigned, do hereby release Charity Kahn, JAM, and JAMspace from any and all liability for injury to my daughter or son or myself, or damage to property, whether based on allegations of negligence or not, in any way incurred by reason of her, his or my participation in the JAMspace programs."

Print name (Parent/Guardian): _____

Signature (Parent/Guardian): _____

Date: _____

Thanks for JAMming! Your registration will be confirmed via email.
Charity Kahn 415.425.0372 charity@jamjamjam.com www.jamboodas.com