



SEMESTER/DÖNEM: \_\_\_\_\_

**Orange County Turkish American Association**  
**Orange County Turkish School – Türk Okulu**  
**REGISTRATION FORM**  
**[ÖĞRENCİ KAYIT BELGESİ]**

<input type="checkbox"/> <b>RETURNING STUDENT(S) [MEVCUT ÖĞRENCİ]</b> <i>[Please only complete name &amp; updates that are required]</i>	<input type="checkbox"/> <b>NEW STUDENT(S) [YENİ ÖĞRENCİ]</b> <i>[Please continue to fill out the form]</i>	
<input type="checkbox"/> <b>OCTAA MEMBER [OCTAA ÜYESİ]</b> <b>EXPIRES ON</b> _____	<input type="checkbox"/> <b>NON-MEMBER [ÜYE DEĞİL]</b>	
Student's Name (first/last): [Öğrencinin Adı/Soyadı]	DOB [Doğum Tarihi]:	Turkish Level [Türkçe Seviyesi]: <input type="checkbox"/> Beginner; <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Student's Name (first/last): (Öğrencinin Adı/Soyadı)	DOB [Doğum Tarihi]:	Turkish Level [Türkçe Seviyesi]: <input type="checkbox"/> Beginner; <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Student's Name (first/last): (Öğrencinin Adı/Soyadı)	DOB [Doğum Tarihi]:	Turkish Level [Türkçe Seviyesi]: <input type="checkbox"/> Beginner; <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Name of Parent/Guardian [Velisinin Adı]:	Relationship [Yakınlığı]:	
Home Address [Ev Adresi]:		
Telephone/Mobile:	E-Mail:	
<b><i>In Case of Emergency, please provide other contacts [Acil bir durumda velisine ulaşılamazsa, irtibat kurmak için önerilen kişi veya kişilerin ismi ve telefon numaraları]:</i></b>		
Name [Adı/Soyadı]:	Tel:	
Amount of Tuition Paid [Ödenen Kayıt Ücreti]: <input type="checkbox"/> <b>Cash</b> <input type="checkbox"/> <b>Check#:</b>	I would like to support the School Program with an additional tax-deductible donation [gelir vergisinden muaf ilave bağışla okula katkıda bulunmak istiyorum]:	
<b>Student's Signature</b> (For adults/yetiskinler için):	<b>Date</b> [Tarih]:	
<b>Parent/Guardian's Signature</b> (Veli imzası):		
<b>Please make checks payable to "OCTAA" with Turkish School in <u>for</u> section of the check &amp; send it to OCTAA</b> <b>P.O. Box 51627</b> <b>IRVINE, CA 92619-1627</b> <b>TEL/FAX: (949) 608-3402</b>		
I would like to volunteer for the Orange County Turkish School:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
I would like to become a teacher/committee member:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments/Suggestions about the School [Okul Hakkındaki Önerileriniz]:		

***Please Note: No refunds will be made after the 2nd class session [2. dersten itibaren kayıt ücreti geri iade edilemez]. Minimum class size is 10 students. School may cancel any class based on enrollment level.***

Revision Aug 2008

# PARENT/GUARDIAN CONSENT FORM

(FOR MINORS)

The child/student named \_\_\_\_\_ has my permission to participate in the OC Turkish School activities. In the event of injury, I hereby release and hold harmless from any liability ATASC, OCTAA, and OC Turkish School, its educational committee members, teachers, staff, volunteers, and the owner of the building in which the school activities are being held, for damages, or claim for personal injury including accidental death, as well as claims for property damage which may arise in connection with the above named activities. Additionally, in the event of an injury that may demand medical attention, I hereby authorize emergency treatment for my child and I will be responsible for the payment for said treatment. In addition, I agree to cooperate with all school procedures and regulations. My child may be photographed / videotaped during school activities, and pictures/video may be published/shown in school website, brochure, advertisements and announcements.

Name of Parent/Guardian : \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

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## VELİ FERAGAT BEYANATI (ÇOCUKLAR İÇİN)

\_\_\_\_\_ adli çocuk/ogrenci OC Turk Okulu aktivitelerine katılmak üzere benden izin almıştır. Olası bir kaza ve yaralanma halinde oluşabilecek hic bir durumdan ATASC, OCTAA ve OC Turk Okulu, okulun öğretmenleri ve personeli, ve okulun yapıldığı binanın sahibi sorumlu değildir. Bunlara ek olarak, acil tıbbi müdahale gerektiren bir yaralanma halinde velisi bulunduğum çocuğun tedavisine izin veriyorum ve tıbbi masraflardan kendim sorumlu tutulmayı kabul ediyorum. Ayrıca, okulun tüm kurallarına uymayı kabul ediyorum, çocuğumun okul etkinliklerinde çekilmiş resimlerinin/videosunun okul websitesinde, reklamlarda veya okul materyallerinde yayınlanmasına izin veriyorum.

Öğrenci Velisinin Adı ve Soyadı: \_\_\_\_\_

Öğrenci Velisinin İmzası: \_\_\_\_\_ Tarih: \_\_\_\_\_

# CONSENT FORM

(FOR ADULT STUDENTS)

In the event of injury, I, \_\_\_\_\_, hereby release and hold harmless from any liability ATASC, OCTAA, and OC Turkish School, its educational committee members, teachers, staff, volunteers, and the owner of the building in which the school activities are being held, for damages, or claim for personal injury including accidental death, as well as claims for property damage which may arise in connection with the above named activities. Additionally, in the event of an injury that may demand medical attention, I hereby authorize emergency treatment for myself and I will be responsible for the payment for said treatment. In addition, I agree to cooperate with all school procedures and regulations. I may be photographed / videotaped during school activities, and pictures/video may be published/shown in school website, brochure, advertisements and announcements.

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

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## FERAGAT BEYANATI

(YETİŞKİN ÖĞRENCİLER İÇİN)

Burada adi yazili olan ben, \_\_\_\_\_, olasi bir kaza ve yaralanma halinde olusabilecek hic bir durumdan ATASC, OCTAA ve OC Turk Okulu, okulun ogretmenleri ve personeli, ve okulun yapildigi binanin sahibin sorumlu olmadigini kabul ettigimi beyan ediyorum. Bunlara ek olarak, acil tibbi mudahale gerektiren bir yaralanma halinde, tedavime izin veriyor ve tibbi masraflardan kendim sorumlu tutulmayi kabul ediyorum. Ayrica, okulun tum kurallarina uymayi kabul ediyor, ve benim okul etkinliklerinde cekilmis resimlerimin/videomun okul websitesinde, reklamlarda veya okul materyallerinde yayinlanmasina izin veriyorum.

Öğrenci İmzası: \_\_\_\_\_

Tarih: \_\_\_\_\_