



Spanish Club at Kokanee

Learn Spanish with Matilde Melendez

Winter Session Class 201

Class will be on a first-come, first-paid basis.
Class will have 5 min. / 10 max. students each.
Class is for students who attend Kokanee only.

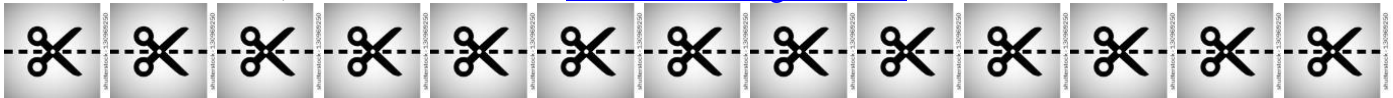
W 8:25am – 9:10am (3rd- 5th) (\$150 / 10 classes) Jan. 9th – March 27th - No classes Feb.20th and 27th.

“My goal is to make a child’s first experience with Spanish an enjoyable one; to create an awareness of other cultures, and teach basic vocabulary and phrases. I have over ten years of experience teaching Spanish throughout the Eastside.” - Matilde Melendez

These activities are neither sponsored nor endorsed by the Northshore School District or any of its schools. The district assumes no responsibility for the conduct during or safety of any of the activities. Northshore School District shall be held harmless from any cause of action, claim or petition filed in any court or administrative tribunal arising out of the distribution of these materials including attorneys' fees and judgments or awards. There will not be reimbursements for up to 2 canceled classes. If there are more than 2 classes you will be reimbursed in full for all missed classes by the last day of class. Cancellations are aligned with school closers and may occur if the teacher is ill. There will not be a substitute for this class. I will inform parents in the case of my illness via email

TO REGISTER, please email the information below to matildemel26@gmail.com or fill out the form and send along with a check to Matilde Melendez, 11902 NE 151Pl, Kirkland, WA 98034. LAST DAY OF REGISTRATION is: 01/04/2019

For more information, contact Matilde at: matildemel26@gmail.com or 206-434-7703.



Yes, we would like to learn Spanish!

PLEASE:

(Attn: Matilde Melendez)

--Print clearly and fill in all the information below.

-- List primary phone numbers and email address; so you can be contacted quickly in case of emergency!

Student’s name: _____

Student’s grade: _____ Student’s teacher: _____ Student allergies: _____

Parents’ names: _____

Primary phone number: _____ Alternate phone number: _____

Primary email address: _____ Alternate email address: _____