

FAMILY NAME _____ MOTHER _____ FATHER _____ EMAIL _____

ADDRESS _____ ZIP _____ PHONE _____ CELL _____

SUNDAY NURSERY PROGRAM

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125 + YOUTH DUES

SUNDAY KINDERGARTEN PROGRAM

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125 + YOUTH DUES

SUNDAY ADV. A&C/BAKING/DANCE

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125 + YOUTH DUES

1ST & 2ND GRADE B-BALL CLINIC

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125+ YOUTH DUES

3RD & 4TH GRADE B-BALL CLINIC

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125 + YOUTH DUES

4TH GRADE B-BALL CLINIC(GIRLS)

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125+ YOUTH DUES

4TH GRADE INTRAMURALS

NAME _____

GRADE _____

SCHOOL _____

FEE: \$100 + YOUTH DUES

5TH GRADE INTRAMURALS

NAME _____

GRADE _____

SCHOOL _____

FEE: \$100 + YOUTH DUES

6TH GRADE INTRAMURALS

NAME _____

GRADE _____

SCHOOL _____

FEE: \$100 + YOUTH DUES

GIRLS 5TH/6TH GRADE BASKETBALL
GIRLS 7TH/8TH GRADE BASKETBALL

NAME _____

GRADE _____

SCHOOL _____

FEE: \$125+ YOUTH DUES

TUESDAY 6TH NIGHT GYM

NAME _____

GRADE _____

SCHOOL _____

FEE: \$50 + YOUTH DUES

MONDAY JUMP ROPE

NAME _____

GRADE _____

SCHOOL _____

FEE: \$90(15 SESSIONS) + YOUTH DUES

FAMILY YOUTH REGISTRATION ON REVERSE SIDE—IF NOT ALREADY REGISTERED!