

KIDS FEST 2020 - REGISTRATION FORM

1st Child's Name: _____

Grade : _____ Age: _____ Birthdate: _____

Area of Interest: _____

2nd Child's Name: _____

Grade : _____ Age: _____ Birthdate: _____

Area of Interest: _____

3rd Child's Name: _____

Grade : _____ Age: _____ Birthdate: _____

Area of Interest: _____

Fee Enclosed: \$ 5.00 per child

Cheque _____ Cash _____

Does your child/ren have access to a Device for Zoom and Vimeo for Friday night? _____

How many people from your family will be participating in Saturday morning's Car Rally? _____

A Church Waiver form is to be completed with each participant named to meet Government Guidelines. Waiver to be available to registered families closer to event date.

Any Medical Conditions/Allergies (Food or Environmental) we should be aware of:

FEES must be paid by **Sunday, September 13th**

Contact Phone #'s _____

For Emergencies

This MUST be filled in.

Parent's Name _____

Parent's Signature _____

Parent Email _____