



PLEASE ENCLOSE A \$25.00 PER FAMILY NON-REFUNDABLE REGISTRATION FEE

Address:					
Home Phone#	·				
Cell Phone #: _					
Work Phone #:					
Tee Shirt Size	e: Please Check	and Write	Chi	d's Name besi	de Size
Size	Please Check	Child's Nam	ne		
Child Small					
Child Medium					
Child Large					
Adult Small					
Adult Medium					
Adult Large					
Adult XL					
Adult XXL					
attend on half	n X below the da -day basis (4 hou	rs).			
Monday	Tuesday	Wednesd	ay	Thursday	Friday
Δnnrov	imate Arrival Tim	ام ا	Δ	oproximate Depa	arture Time
Арргол	annace Annvar Inn			oproximate bept	artare riirie
		1			
There wil	l be a late fee of	\$10.00 for ev	verv 1	0 minutes after	6:00pm starting
There wil	l be a late fee of	\$10.00 for ev	very 1	0 minutes after	6:00pm starting

Please fill out form, sign and return A.S.A.P to Miss H. Rodgers K1.