

2010 SPRING KICK-OFF JUNIOR FARMER APPLICATION

\$48/4 WEEK SESSION – Beginning March 1st, 2nd, 3rd, & 6th

SESSION, DAY _____ **TIME** _____

CHILD'S NAME _____ SCHOOL YEAR _____ AGE _____ SEX _____

ADDRESS _____ BIRTHDATE ____/____/____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

PARENTS'/LEGAL GUARDIANS' NAMES _____

WORK PHONES (____) _____ (____) _____

If parents are not available, in case of emergency, please call:

Name: _____ Phone: (____) _____

Name: _____ Phone: (____) _____

**Please discuss any special needs/limitations/allergies or restrictions for your child at the farm: _____

Your registration for your child's participation in programs at The Center authorizes The Center to use photos or videos of your child for promotional services.

Choose a Session:

Ages 3-6

Saturday 10:00-11:00am or 11:30-12:30pm Beginning March 6th

Monday, Tuesday or Wednesday 10:00-11:00am or 1:30-2:30pm Beginning March 1st, 2nd or 3rd

Ages 6-8

Saturday 2:00-3:00 Beginning March 6th

Monday or Tuesday 4:00-5:00pm Beginning March 1st or 2nd

Ages 9-12

Saturday 3:30-4:30pm Beginning March 6th

Wednesday 4:00-5:00 Beginning March 3rd