

School's Out at The Children's Farm

Monday, February 18th 9:00am-2:00pm

\$50 Registration

Child's Name: _____ Age: _____ Sex: _____

Address: _____ Birthdate: ____ / ____ / ____

City: _____ State: _____ Zip: _____ Phone: (____) _____

E-mail: _____

Parent/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:**

- **Please bring a pack lunch for your child.**
- **This is a drop-off program.**
- **Please ensure your child is dressed appropriately for the weather.**
- **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.**