



# Registration Form

\*\*Ages 4 Years old through 6<sup>th</sup> Grade can join in on the FUN\*\*

Child's Name: \_\_\_\_\_ Gender: M or F

Child's Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade Leaving: \_\_\_\_\_

Shirt Size: (please circle) YXS YS YM YL YXL AS AM AL AXL

Parent/Guardian Names: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian e-mail: \_\_\_\_\_

Emergency Contact: (other than listed above) \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_ Medical Conditions: \_\_\_\_\_