



# Spring 2017 Youth Registration Form

✓ Please refer to all registration information in the brochure!

\* REGISTRATION BEGINS ON Monday January 9th!

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian: (H) \_\_\_\_\_ (Cell) \_\_\_\_\_ (W) \_\_\_\_\_ Age \_\_\_\_\_

Wheelchair Accommodations: \_\_\_\_ Yes      Attend with an aide: \_\_\_\_ Yes

Email Address: \_\_\_\_\_

Aide Name: \_\_\_\_\_ Aide Email Address: \_\_\_\_\_

## Youth Programs:

<u>Programs</u>	<u>Program Cost</u>	<u>Aide Cost</u>	<b>Total</b>
_____ Kids Night Out	\$25	\$25	
_____ Adventure Club	\$10	\$10	
_____ School's Out	\$10	\$10	
_____ UALR Basketball Game	\$20	\$20	

\*Participants with aides, advanced payment will be required for outings/tickets.

Please include this in your total.

**TOTAL:** \_\_\_\_\_

Return with payment to:  
 Little Rock Parks and Recreation  
 Therapeutic Recreation Division  
 7201 Dahlia Drive  
 Little Rock, AR 72209

\*We may take photos of participants enrolled in programs or outings. These photos are used only for promotion of our TR services in the form of displays, brochures, videos and flyers. Please check yes to release photo sharing privileges to the TR staff or no if you wish for you participant to remain out of promotional materials.

Yes \_\_\_\_ No \_\_\_\_