



## Fall 2018 Adult Registration Form

***Please refer to all registration information in the brochure!***

\* REGISTRATION BEGINS ON ***Monday, July 30<sup>th</sup>!***

Name: \_\_\_\_\_ Age \_\_\_\_\_

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

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

Parent/Guardian: (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

Wheelchair Accommodations: \_\_\_ Yes \_\_\_ No

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

### Adult Programs:

<u>Programs</u>	<u>Program Cost</u>	<u>Aide Cost</u>	<b>Total</b>
____ "Branch Out" Adult Day Program	____ 1 day/week = \$100.00 ____ 2 days/week = \$165.00 ____ 3 days/week = \$240.00  <b>Please note which days you will be attending:</b> ____ Tuesdays ____ Wednesdays ____ Thursdays	<b>Aide Fee:</b> <i>Dependent on activity. We will notify you ahead of time.</i>	
____ Weekend Warriors	<b>\$25.00</b>	N/A	

### Adult Community Outings:

<u>Programs</u>	<u>Program Cost</u>	<u>Aide Cost</u>	<b>Total</b>
____ Race for the Cure (girls only)	<b>\$30</b>	n/a	
____ Thanksgiving Potluck (Adult Cooking Class)	<b>\$5</b>	<b>\$5</b>	
____ Murry's Dinner Playhouse	<b>\$33</b>	<b>\$33</b>	
____ Arkansas Symphony Orchestra	<b>\$30</b>	<b>\$30</b>	

Form of Payment- \_\_\_\_\_ Check  
 \_\_\_\_\_ Cash  
 \_\_\_\_\_ Waiver

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

**\*\*If submitting program fees for payment by Waiver please provide the following information:**

Agency Name \_\_\_\_\_ Case Manager \_\_\_\_\_

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