

REGISTRATION FOR CHILDREN

Child's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ School grade: \_\_\_\_\_

Snack restrictions: \_\_\_\_\_

Potty Trained: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Training

Allergies: \_\_\_\_\_

Any other special needs or requests:

\_\_\_\_\_

Child's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ School grade: \_\_\_\_\_

Snack restrictions: \_\_\_\_\_

Potty Trained: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Training

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