

# COMMUNITY EDUCATION

## Youth Registration

Name \_\_\_\_\_ Grade \_\_\_\_ Teacher \_\_\_\_\_

Parent's Name \_\_\_\_\_ Email \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Class or Activity: \_\_\_\_\_

Date of Class or Activity: \_\_\_\_\_

After class my child will:     Go to Valleyland     Be picked up by \_\_\_\_\_

*Remember to send a message to your child's teacher granting permission for your child to stay after school for the class or activity. Children will not be allowed to stay if permission is not received.*

Send form, along with fee, to Chatfield Community Education, 11555 Hillside Drive or submit form to the elementary office, ATTN: Community Education.

