

PRE-REGISTRATION FORM



Backyard / At Home / Basement Sport Program

OPTIONS: July August September

One day a week Preferred day _____

Five days a week (Monday to Friday) Preferred dates _____

TIMES OFFERED: 8:45-10:15am 11:30-1pm 2:15-3:45pm 5-6:30pm

AGES: 2yrs-3yrs (Parents participate. Maximum numbers permitted include parents)

4yrs and older (Parents approve compatibility of the age range)

** For non-parented programs we recommend an age range of 3-5yrs, 4-7yrs or 5-8yrs*

LOCATION ADDRESS: *One location is required for the entire booking*

Location Address _____ Postal Code _____

City _____ Main Intersection _____ Parking _____

PARENT VOLUNTEER:

Parent Volunteer: First Name _____ Last Name _____

Parent Volunteer: Mobile # _____

PARTICIPANTS:

#1 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#2 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#3 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#4 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#5 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#6 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#7 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

#8 Child's Name _____ Age _____
Parent's Name _____ Email _____ Mobile _____

LET FAMILIES KNOW:

1. They will need to sign a waiver on registering.
2. We will provide safety guidelines on booking.
3. When your Backyard program is confirmed, each family will receive a unique link to register.