



Mini Movers Registration

Wednesday's 10:00-11:00am

Parent Info:

Name: _____

Phone: _____

Email: _____

Child Info:

Name: _____

Age: _____

Name: _____

Age: _____

Name: _____

Age: _____

Name: _____

Age: _____

_____ I consent to having my child/children's photograph(s) taken and being used for marketing and social media purposes.

_____ I consent to having my email address used to receive information on similar upcoming events and opportunities.

Signature

Date

_____ \$25.00

_____ FREE- Annual Family Pass Holder