Ŀ	FISHER PARK OF THE			1	Like us on
X Select	Age	<u>Day</u>	<u>Dates</u>	<u>Time</u>	
	5 to 7 year olds	Tuocday	Ian 7th - Mar 10th	6:00 - 6:55 pm	

o to r year olds	lucsuay	Jan 7 - Iviai		0.00 - 0.00 pm.	
8 to 11 year olds	Tuesday	Jan 7 th – Mar	10 th	7:00 – 7:50 pm.	
\$145/per child \$235/2 children	\$290/3 childre	en same family	*Payment	by CASH or CHEQUE ONLY*	
CHILD'S NAME:	N	NF Age:	DOB_		
CHILD'S NAME:					
CHILD'S NAME:	M	/F Age:	DOB_		
Home Phone: ()		Cell F Posta	Phone: (al Code:)	
Parent/Guardian Names:					
Email (print clearly):	formation from Fisher	Park Community Cent	e and the l	Fisher Park Recreation Council	
Health or Special Needs:					
Emergency Contact:			e:()_		
*Parents (or a designated person) are responsible for s		Sig	-	_	
Location: Mcl		•			
* Please complete information below*		-		Amount \$	
	ark Community I Holland Ave. Otta	Recreation Counc	il Receip		
Fees Paid: \$					
Received From:					
		Date :			
Child's Name					