

The Strengthening Families Program REGISTRATION FORM



Person completing form: <input type="checkbox"/> Kerri <input type="checkbox"/> School Site <input type="checkbox"/> Parent <input type="checkbox"/> Other			
Program or Activity: Strengthening Families Program			
Registration Date:	Program Dates: Thursdays, January 28 to April 21, 2016	Program Time: 5:45pm to 8pm	
Location: Cordova Church of Christ, 10577 Coloma Road, Rancho Cordova			
Age/Fee/Other Requirements: Youth must be ages 7-16 the program is free to all participants. Children 6 and under are in a FREE supervised childcare program.			
Youth Participants (ages 7 -16)	Name:	Age:	School:
	Name:	Age:	School:
Adult Participants	Name:		
	Name:		
<input type="checkbox"/> Child Care Provided, Name/Age of Children Who Need Child Care:	Name:		Age:
	Name:		Age:
<input type="checkbox"/> No Child Care Needed	Name:		Age:
Mailing Address:		Phone Number:	
Email Address:			
<i>Cordova Church of Christ and FCUSD staff does not assume liability or responsibility for injuries/thefts/damage to person(s) or property associated with participation in this activity or program. This form will be kept on file in the Health Programs Office, FCUSD and made available to activity coordinators.</i>			
Signature Authorizing Childcare Services:			
Emergency Name/Number:			
Allergies/Medical Conditions:			

Complete & Return Form to Kerri Kaye, FCUSD Health Programs, 1965 Birkmont Drive, Rancho Cordova, CA 95742

Additional Details or Comments:
