

Children's Class Registration Form Winter Spring Summer Fall



Name of Child/Parent(s)	DOB(all non members)	Class	Series/Day	Fee
<input type="checkbox"/> Please send me scholarship information			TOTAL ENCLOSED:	\$

Deadlines for Enrollment: Eight pre-registered children are needed in order to run each class.

Peanut-Free Environment: Due to the life-threatening risk to children with peanut allergies, we ask that you do not bring or send peanut or peanut-containing products to Habitot. Thank you for your cooperation.

Sign my credit card up for eScrip so I can help support Habitot without spending a dime.

Parent's Name _____

Address _____

City, State, Zip _____

Membership Number _____ Phone _____

E-mail address _____

VISA or M/C # _____ Exp _____

Adult Class Registration Form Winter Spring Summer Fall



Name of Participant	Class	Date of Class	Fee
<input type="checkbox"/> Please send me scholarship information			TOTAL ENCLOSED:
			\$

Childcare Reservation (Child's first name)	Child's Birthdate MM/DD/YY	Has this child been with a babysitter before?
		Y / N
		Y / N

Deadlines for Enrollment: Ten pre-registered adults are needed in order to run each class.

Peanut-Free Environment: Due to the life-threatening risk to children with peanut allergies, we ask that you do not bring or send peanut or peanut-containing products to Habitot. Thank you for your cooperation.

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Participant's Name _____

Address _____

City, State, Zip _____

Membership Number _____ Phone _____

E-mail address _____

VISA or M/C # _____ Exp _____