



KDKCKS Summer Program
Registration Form

Child's Name: _____

Child's Age and Date of Birth: _____

Grade JUST completed: _____

Parent/Guardian Names: _____

Phone: _____ Cell: _____

Emergency Contact Name and Number: _____

Do you regularly use Facebook? Yes or No

If not what is the best way to contact you? _____

Allergies/medical concerns: _____

Release from Liability: Recognizing that the Town of Twillingate will do its best to ensure a safe experience, I understand that accidents may occur both from my child's participation in activities and from transportation to and from the program. I agree to assume these risks. **I have read and understand the above and have completed this form to the best of my ability.**

Signature of parent or legal guardian: _____

Date: _____

Program Details

This year the programs will be an all-inclusive program. When you register you will be have the choice to attend all the activities that are offered for your child's age group. The program will involve the following activities; softball, basketball, soccer, and outdoor activities (i.e. hiking and themed days), each being offered at least once a week. Schedule to follow on Facebook and paper during the first session. **Start date will be Tuesday, July 2nd, 2024.**

Fees - email payment to kidkicks@townoftwillingate.ca

\$80.00 1st child enrolled

\$60.00 each additional child

\$25.00 Tot and Parent

Amount Paid: _____

Office Use Only:

KidKicks Summer Program is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement and volunteer leadership. We hope everyone will have a great summer and look forward to working with you.