

Taekwondo Classes

Registration Form

Location: Epping Elementary School Multi-Purpose Room

Open Enrollment

3:15 P.M. - 4:00 P.M.

Monday and Thursdays

\$65 per month (checks payable to Derry ATA)

Kindergarten through the eighth grade

*This is the one of two forms needed to register your child for this program. The second form is the Participant Information Form. This is the only form you need if you have registered your child for either the recreation before or after school programs.*

Participant's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Important medical history we should know:

\_\_\_\_\_  
\_\_\_\_\_

Any special accommodation needed: \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, please state how we can best accommodate you?

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Parent Signature

Date

Return this form to the Epping Recreation Department by mail: 17 Academy Street, Epping, NH.

Please complete the **Participant Information Form** only if you have not completed one in the last month for either the Recreation before/after school program.

Form 1 of 2

**THIS IS A RECREATION SPONSORED PROGRAM**