Bakin' & Life Size Games

DATE: Monday, October 3
TIME: 8:00am - 3:30pm
AGE: Pre K - 6th
COST: $15.00
LIMIT: 26

Let's have fun playing some inside Life Size Games, or depending on the weather some outside games. Please send your student in closed toe tennis shoes. We will also be doing a couple of baking or non-baking items.

Please send a lunch

Registration forms **MUST COMPLETED** fully and fees must be paid in full on/before the deadline; if registration is incomplete it will be returned to be completed, form must be returned before/on date of program or participant/s will not be allowed to go and fee **WILL NOT** be refunded. Refunds for inability to attend will only be granted if the SRD is notified of participant/s 24 hours prior to the start of the program. For more details on our cancelation policy please refer to srd24.com or call the main office.

****Please do not send electronic devices with your student.****

Registration Information

- **DEADLINE:** Wednesday, September 28th
- Send your completed registration to:
  PO BOX 356
  Shoshoni, WY 82649
- Bring it to the SRD Building located at 97 S. Maple in Shoshoni.
- Or give it to your teacher to put in the SRD box located in the Elementary Office.
- Let us know if you would like to volunteer! Applications can be found on our website or you can pick them up at the office.

Shoshoni Recreation District #24 Registration
Phone #: (307)876-2663 **phone #:** (307) 876-2572
Email: rec24@wyoming.com **Website:** www.srd24.com
Mailing Address: PO Box 356, Shoshoni, WY 82649
Physical Address: 97 S. Maple, Shoshoni WY
Please either mail this form or bring it in to the SRD Office.
SRD is not responsible for fees/registrations not turned directly in to the SRD Office.
PLEASE PRINT AND WRITE CLEARLY.

Shoshoni Recreation District #24
Live to Play. Play to Live.

Participant's Name: _____ (First / Last) Age:_____ Sex: M/F

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Pick up/Drop off Choices:

Parent's/Guardian's Name: _____ (First / Last)
(If participant is under 18)
Mailing Address: _____ (PO Box/Street Address) _____ (City) _____ (State) _____ (Zip)
Phone #'s: _____ (Home) _____ (Cell) _____ (Work)
Person other than parent allowed to pick-up child: _____ _____
(please see disclosure on the bottom of this form) (First / Last / Phone Number)

Emergency Contact: (not you) _____ (Name) _____ (Phone #)

I hereby release the SRD #24 and staff/volunteers associated with this organization from any liability while participating in **Bakin' and Life Size Games.** I further give permission for the above participant to be treated medically if my emergency contact cannot be reached. I also understand that I will assume the cost of treatment. Please visit our website at www.srd24.com for additional registrations. Participant/s picture may be taken while participating in SRD events and used in our publications. Registration forms **MUST COMPLETED** fully and fees must be paid in full on/before the deadline; if registration is incomplete it will be returned to be completed, form must be returned before/on date of program or participant/s will not be allowed to go and fee **WILL NOT** be refunded. Refunds for inability to attend will only be granted if the SRD is notified of participant/s 24 hours prior to the start of the program. For more details on our cancelation policy please refer to srd24.com or call the main office. No tobacco/e-tobacco of any kind is permitted within 50 feet of any SRD facilities or vehicles. SRD is not responsible for lost or stolen registrations or fees. We highly suggest that payments are given to us in envelopes labeled SRD. No persons other than a parent or the alternate pick up listed above will be allowed to pick up the registered child unless SRD is given proper notice.

Signature:_____ Date:_____

OFFICE ONLY: Payment type($15.00): Cash_____ Check_____