

New Richmond Area Centre YCI Registration Form

Participant Information

Child's Name _____ Gender ____ Birth date _____ Age _____

Parent/Guardian Name _____

Billing Address _____

City/State/Zip _____

Home Phone _____ Work Phone _____

Email _____

T-shirt Size YOUTH ___S___M___L___XL ADULT ___S___M___L___XL

Payment Information

Due at Registration: \$15 Per Month (minimum 1 month, max of 3) = Total Amount Due \$_____

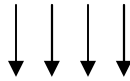
Payment Method ___Cash___Check___Credit or Debit Card: Visa or MasterCard

Youth Character Initiative ___ 10-11 years old ___ 12-13 years old ___ 14-15 years old

June 7-11	June 14-18	June 21-25	June 28-July 2	July 5-9	July 12-16	July 19-23	July 26-30	Aug 2-6	Aug 9-13	Aug 16-20	Aug 23-27
___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon	___ Mon
___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues	___ Tues
___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed	___ Wed
___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs	___ Thurs
___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri	___ Fri

Office Use Only Date _____ Amount Paid _____ Staff Initials _____

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SAVINGS

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\$5 OFF

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Meet our in-store nutritionist Mary Jo. She is available to answer all your nutrition questions, find products that meet your needs and offer meal ideas.