Community Education Registration

Mail or Drop off: 1200 Town Square, Shakopee, MN 55379 Fax: 952.496.5098 (call to confirm receipt) Or register online at www.shakopee.k12.mn.us - select Community Education/Questions? Call 952.496.5029

Participant's Name		*Email				
*By sharing your e-mail, you will be						specials.
Address		City		Zip		
Home Phone	Work Phone			Cell Phone		_
Youth Class Info ***For Run ' Birth date / / (circle one	M / F Parent's Nan					
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Special Needs						
Class Name		Class Code	e	Start Date	Fee	
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Liability: I hereby release, absolve, and agents from any damage resulting fron understand Shakopee Community Educ By signing this form, I am allowing phopublications or communications.	n an injury incurred by . cation and School Distr	me or my child rict #720 assum	while parti ne no respo	cipating in the ab nsibility before, d	pove mentioned prog Juring or after the pr	grams. I
Signature		_ Date /	/ /_			
Visa Mastercard Discover / Card (circle one)	Number				Exp Date /	
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Special Needs						
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