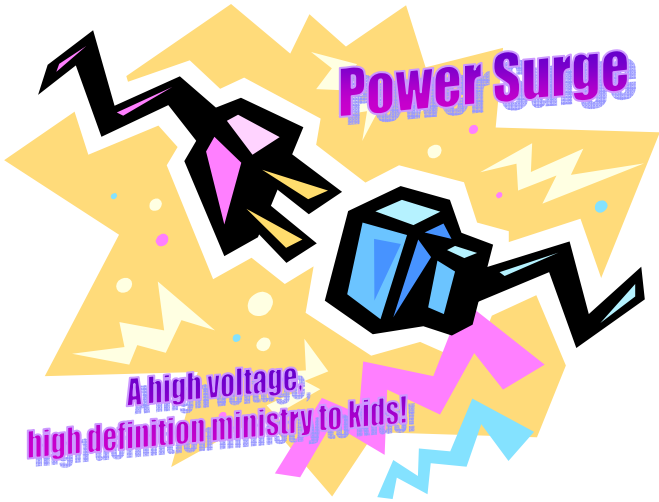


REGISTRATION



STUDENT'S NAME _____

STUDENT'S AGE _____ SCHOOL GRADE _____

BIRTH DATE _____

PARENT(S) NAME(S) _____

ADDRESS _____

PHONE _____

EMAIL _____

Please check the time the student will attend POWER SURGE *most* of the time (to help us to plan staffing)

_____ 9:00am _____ 10:30am _____ not sure

REGISTRATION



STUDENT'S NAME _____

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