

**CITY OF DONALDSONVILLE**



**Back to School  
Refresher Program  
2016**

**Registration Form**

**Student's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Grade:** \_\_\_\_\_

**Enrolled School Year 2015-2016**

**School Attending:** \_\_\_\_\_  
**(in August 2016)**

**Parent/Guardian Name:** \_\_\_\_\_

**Parent / Guardian :** #1 \_\_\_\_\_ / #2 \_\_\_\_\_  
**Telephone #s**

**Food Allergies:** \_\_\_\_\_  
\_\_\_\_\_

**Medications currently:** \_\_\_\_\_  
**taking** \_\_\_\_\_

**T-Shirt Size**  
**Circle One (1)**

**Youth**  
**XS / S / M / L / XL**

**Adult**  
**S / M / L / XL / 2X**

**Parent / Guardian:** \_\_\_\_\_  
**Signature**

**Date:** \_\_\_\_\_