

Yankton Parks and Recreation Registration

Parent/Guardian Name : _____
First *Last*

Have you created an online account? Yes No

Street: _____

City State, Zip: _____

Email Address: _____

Phone: Home: () _____ Work: () _____

Activity Participant: _____
First *Last*

Gender: Male Female Date of Birth: / / Grade level: _____

Emergency Contact: _____
First *Last* *Relationship*

Phone: Work: () _____ Home: () _____
 Same as Above

Any health restrictions we should be aware of? (Explain) _____

Activity Participant: _____
First *Last*

Gender: Male Female Date of Birth: / / Grade level: _____

Emergency Contact: _____
First *Last* *Relationship*

Phone: Work: () _____ Home: () _____
 Same as Above

Any health restrictions we should be aware of? (Explain) _____

Activity Participant: _____
First *Last*

Gender: Male Female Date of Birth: / / Grade level: _____

Emergency Contact: _____
First *Last* *Relationship*

Phone: Work: () _____ Home: () _____
 Same as Above

Any health restrictions we should be aware of? (Explain) _____