

Recreation Programs - School Aquatic Lessons Registration

Kinsmen Leisure Centre, 2001 Oak Street, Sherwood Park, Alberta T8A 0W9
Mail: Recreation Administration Office, 2001 Sherwood Drive, Sherwood Park, AB T8A 3W7

Phone 780 464-2112 Fax 780 464-8469

Family name				
Dhana numbar	Last name		First name	Initial
Phone number	Evening phone number	er [Daytime phone number	E-mail (to receive promotional Recreation Program information)
Address	Ctroot address			
	Street address			
	City		Province	Postal code
Emergency co	ntactName (different f	from about)		Phone number
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Registrant	First name		ast name (if different than	above)
Birthdate	/dd/yy)	male	ale 🗌	···· ·,
Lesson timeslo	ot	Level registering in		School name
Specify any m	edical or special r	needs we should be a	aware of or if Epipe	en use is required.
(additional forms may	be required if medical o	r special needs are identified)		
Personal informatio managing and adm	ninistering school aqu	he authority of section 33	s. If you have question	Information and Protection of Privacy Act and will be used for about the collection, use or disclosure of this information.
Office use only	Customer number		Date processed	CSR initials
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Family name	Last name		First name	Initial
Phone number				
Address	Evening phone numbe	er [Daytime phone number	E-mail (to receive promotional Recreation Program information)
Address	Street address			
	City		Province	Postal code
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Registrant				
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(additional forms may	be required if medical o	r special needs are identified)		
Personal informatio		he authority of section 33	(c) of the Freedom of	Information and Protection of Privacy Act and will be used to
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