



Parks and Recreation Department
1100 Chatham Av Norwalk, IA 50211 515.981.9206



Craft Club

PRE-REGISTRATION REQUIRED

(Register online @ www.ci.norwalk.ia.us, Parks and Recreation office, or by mail)

This program is for children in 1st through 5th grades. This activity will bring smiles to the student along with their creativity. It also helps **socially** - interacting with fellow students while making their creation, **developmentally** - utilizing and strengthening their fine motor skills, and **emotionally** - giving your child a sense of accomplishment and pride in what they made! Come out and experiment today. They meet once a month after school for five months. Sign up all at once or monthly.

Month		Lakewood	Registration Dates
October		6th	Sept 19 to Sept 30
November		17th	Oct 17 to Oct 28
December		8th	Nov 21 to Dec 2
January		12th	Dec 26 to Jan 6
February		9th	Jan 23 to Feb 3

Information

Cost: \$10.00 resident/\$11.50 non resident per class

Location: Art Room @ Lakewood

Time: 3:15 to 4:30 pm

Min/Max: 6/20



TURN OVER TO FILL OUT REGISTRATION INFORMATION

Norwalk Parks and Recreation Registration Form

Individual Information:

Name: First MI Last

Birth Date: Grade: Sex:

Address:

City, State, Zip: IA

Daytime Phone #: Type:

Evening Phone #: Type:

Cell Phone #: Preference:

Email Address

Parent

Please place an "x" by the programs you will be attending and add the total at bottom:

		Resident	Non-resident
<input type="checkbox"/>	October	\$10.00	\$11.50
<input type="checkbox"/>	November	\$10.00	\$11.50
<input type="checkbox"/>	December	\$10.00	\$11.50
<input type="checkbox"/>	January	\$10.00	\$11.50
<input type="checkbox"/>	February	\$10.00	\$11.50
	Total	\$	\$

Activity Information:

Program Registration Fee Late Fee

Financial Assistance Donation:

This program is intended to open up participation opportunities for Norwalk area children by reducing financial obstacles for those who may not be participating because they cannot afford to pay the registration fees.

Would you like to contribute \$1.00 (or more) to this program? Yes _____ No Thank You
(if yes, please add your donation to the registration fee - and THANK YOU!)

Additional Comments/Medical conditions (if any):

FOR OFFICE USE ONLY:

PAID _____ CK# _____ CASH _____ By: _____
 Credit Card _____ Number _____ Expires _____