

September 23rd, 2024 – 9 am to 4 pm

Location: TTR Hall



REGISTRATION FORM PAL Course

| Name of Activity: | PAL Course |
|---------------------------|--|
| Participant's Legal Name: | |
| Date of Birth: | |
| Parent/Guardian Legal | |
| Name (youth under 18): | |
| Contact Phone Number: | |
| Email: | |
| Requirements: | Minimum Age to Register is 12 years old. |
| Date: | |

PLEASE COMPLETE FORM AND SEND BY EMAIL TO: dclarke@kokopelli.ca