

Littlefork CERC

Instructor: Tiffany Dobbs

Join *Tuesdays Toddlers* for a themed morning that includes story time, a snack and a fun quick activity! All supplies will be provided. **Parents/guardians must stay with their child.**

Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, October 1st Tuesday, October 8th Tuesday, October 15th Tuesday, October 22nd Tuesday, October 29th

SELECT DATES YOU'LL ATTEND:	Pagistration East	TOTAL:
 Tuesday, October 1st 	Registration Fee: \$10 PER child, PER session Checks are payable to:	IOTAL:
 Tuesday, October 8th 		
 Tuesday, October 15th 	Littlefork CERC	
 Tuesday, October 22nd 		
 Tuesday, October 29th 	Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	

TUESDAY TODDLER REGISTRATION FORM

Name:	Age:	Grade:		
Mailing Address:				
Parent/Guardian:				
Email:	Phone:			
Emergency Contact & Phone Number:	Emergency Contact & Phone Number:			
Who will be picking up your child?				
Does your child have any medical/allergies?				
PICTURE CONSENT: I, understand and hereby give permission for my child to participate in any photos related to this event. I understand that event/activity programs will use pictures for, but not limited to social media, newspaper, and/or advertisement. I have read and consent to the above paragraph regarding my child. Parent/Guardian Signature:				
Parent/Guardian Signature:		ate:		

Please register your child <u>BEFORE</u> attending a TUESDAY TODDLER session!

Any questions please contact Tiffany Dobbs, CERC Director at cerc@littleforkmn.gov |218-278-4422



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Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, November 12th Tuesday, November 19th Tuesday, November 26th

 SELECT DATES YOU'LL ATTEND: Tuesday, November 12th Tuesday, November 19th Tuesday, November 26th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC	TOTAL:
	Scholarships are available, please contact Tiffany Dobbs, CERC director for more	

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Mailing Address:		
Parent/Guardian:		
Email:		
Emergency Contact & Phone Number:		
Who will be picking up your child?		
Does your child have any medical/allergies?		
PICTURE (I, understand and hereby give permission for my child to participate in programs will use pictures for, but not limited to social media, newspa I have read and consent to the above paragraph regarding my child.		rstand that event/activity

Parent/Guardian Signature: _____

Parent/Guardian Signature: _____ Date: ____

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Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, December 3rd Tuesday, December 10th Tuesday, December 17th

SELECT DATES YOU'LL ATTEND:

- Tuesday, December 3rd
- Tuesday, December 10th
- o Tuesday, December 17th

Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC

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TOTAL:

TUESDAY TODDLER REGISTRATION FORM

Name:	Age: Grade:
Mailing Address:	
Parent/Guardian:	
Email:	
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Who will be picking up your child?	
Does your child have any medical/allergies?	
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I have read and consent to the above paragraph regarding my	y child.
Parent/Guardian Signature:	

Parent/Guardian Signature: ____

Date: ___

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Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, January 7th Tuesday, January 14th Tuesday, January 21st Tuesday, January 28th

 SELECT DATES YOU'LL ATTEND: Tuesday, January 7th Tuesday, January 14th Tuesday, January 21st Tuesday, January 28th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	TOTAL:	
Name:	Age:	Grade:	
Mailing Address:			
Parent/Guardian:			
Email: Phone:			
Emergency Contact & Phone Number:			
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Parent/Guardian Signature:		Date:	

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Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, February 4th Tuesday, February 11th Tuesday, February 18th Tuesday, February 25th

 SELECT DATES YOU'LL ATTEND: Tuesday, February 4th Tuesday, February 11th Tuesday, February 18th Tuesday, February 25th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	TOTAL:	
TUESDAY TODDLER REGISTRATION FO	RM		
Name:	Age:	Grade:	
Mailing Address:			
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Tuesday's 1pm-2pm | Littlefork Lutheran Church

Tuesday, March 4th Tuesday, March 11th Tuesday, March 18th Tuesday, March 25th

 SELECT DATES YOU'LL ATTEND: Tuesday, March 4th Tuesday, March 11th Tuesday, March 18th Tuesday, March 25th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	TOTAL:	
TUESDAY TODDLER REGISTRATION FO	RM		
Name:	Age:	Grade:	
Mailing Address:			
Parent/Guardian:			
Email:	Phone:		
Emergency Contact & Phone Number:			
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Parent/Guardian Signature:			
Parent/Guardian Signature:		Date:	

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Tuesday, April 8th Tuesday, April 15th Tuesday, April 22nd Tuesday, April 29th

 SELECT DATES YOU'LL ATTEND: Tuesday, April 8th Tuesday, April 15th Tuesday, April 22nd Tuesday, April 29th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	TOTAL:	
TUESDAY TODDLER REGISTRATION FO	RM		
Name:	Age:	Grade:	
Mailing Address:			
Parent/Guardian:			
Email:	Phone:		
Emergency Contact & Phone Number:			
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Parent/Guardian Signature:		Date:	

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Tuesday, May 6th Tuesday, May 13th Tuesday, May 20th

 SELECT DATES YOU'LL ATTEND: Tuesday, May 6th Tuesday, May 13th Tuesday, May 20th 	Registration Fee: \$10 PER child, PER session Checks are payable to: Littlefork CERC Scholarships are available, please contact Tiffany Dobbs, CERC director for more information.	TOTAL:	
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Name:	Age:	Grade:	
Mailing Address:			
Parent/Guardian:			
Email: Phone:			
Emergency Contact & Phone Number:			
Who will be picking up your child?			
Does your child have any medical/allergies?			
PICTURE CONSENT: I, understand and hereby give permission for my child to participate in any photos related to this event. I understand that event/activity			

Parent/Guardian Signature: __

Parent/Guardian Signature: _____ Date: _____ Date: _____

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