

TREP\$ Entrepreneur Program

REGISTRATION FORM

Return this form to the Langford Public Library by 4:30 pm on Friday, May 21, 2021.

NO LATE REGISTRATIONS WILL BE ACCEPTED.

NO COST TO PARTICPATE!

This program is sponsored by a grant from Glacial Lakes Area Development to help communities *THRIVE!*
FOR KIDS GOING INTO GRADES 4-8.

PARTICIPANT NAME

ADDRESS

CITY

STATE

ZIP

AGE

GRADE

PHONE NUMBER

EMAIL ADDRESS

PLEASE LIST ANY MEDICAL CONDITIONS OR FOOD ALLERGIES/INTOLERANCES

Please check one.

- I will be picking up my child from the TREP\$ Workshops.
- My child is allowed to go home by themselves following the TREP\$ Workshops.
- _____ has my permission to pick up my child from the TREP\$ Workshops.

Photographic Release:

- I give permission for photographs of my child to be used in press releases and all forms of media for advertising and marketplace promotion.

PARENT NAME

PARENT SIGNATURE

DATE

Volunteers: Are you available to help with this program? Please check all that apply.

Volunteer's Name: _____

- Marketplace (*helping the night or day of the Marketplace itself*)
- Workshop (*helping hand out materials at one or more of the Workshops*)
- Small Business Mentor (*small business owners provide business feedback to children at Workshop III and available to answer questions from youth*)
- Public Relations/Marketplace Advertising (*handing out flyers, posting signs*)