



All Together Now! Registration Form

I'm Signing up for: (name of class) \_\_\_\_\_

Day and Time of class \_\_\_\_\_

Student's Name \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

Student's Name: \_\_\_\_\_ Child's Date of Birth \_\_\_\_\_

Parents' Names \_\_\_\_\_

Email Address: \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cellular: \_\_\_\_\_

Anything we need to know (allergies, medications)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Enclosed is the \$ \_\_\_\_\_ fee

Payable To: Janice Walrafen

Mailing Address:

170 Cherry Tree Hill Road

East Montpelier, Vermont 05651

802-223-1242

[www.alltogethernowvt.org](http://www.alltogethernowvt.org)