



Old Tyme Country School Registration Form 2017

PLEASE PRINT:

Student Name: _____ Age _____ Grade Just Completed _____

Name of Parent(s)/Guardian _____

Mailing Address _____

City: _____ State: _____ Zip: _____

Phone Numbers: Day _____ Cell _____

Email _____

(Circle One)

Session I: July 17-21, 2017

II: July 24-July 28, 2017

III: July 31-Aug 4, 2017

Health Information: Any health conditions we need to know about? (Allergies, daily medication, etc.)

Submit this form and fee to: Kanabec History Center, 805 Forest Avenue West, Mora MN 55051

Questions call 320-679-1665

Fee Enclosed: \$ _____ \$52.50 per student (KHC Members) or \$72.50 (Non-Members)

Make Checks payable to Kanabec History Center

Date: _____ Signature: _____