



☆☆☆ City of ☆☆☆ NEWCASTLE

REGISTRATION FORM

CONTACT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	Alternate Phone		
E-mail			
Registration for			
Other			
ADDITIONAL INFORMATION			
Child's Name	Age		
Child's Name	Age		
Child's Name	Age		
Name(Case of an Emergency)			
Phone	Alternate Phone		
Form of Transportation			
Authorized Person to Pick Up Child			
Name of Parent/Guardian			
Signature of Parent/Guardian			

*Please Contact City Hall 405-387-4427
For More Information on
Possible Fees Associated with Event and/or
Further Registration Instructions
Thank You.*