

# Forest Lake Area Schools Community Education Registration

Register at [www.flaschools.org](http://www.flaschools.org) or use this form. Need help... call the Community Education office at (651) 982-8110 or (651) 982-8120. Nancy or Patty will be happy to assist you!

Participant First Name \_\_\_\_\_ M \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

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

Class # \_\_\_\_\_ Class Title \_\_\_\_\_ Building \_\_\_\_\_ Fee \_\_\_\_\_

Class # \_\_\_\_\_ Class Title \_\_\_\_\_ Building \_\_\_\_\_ Fee \_\_\_\_\_

Class # \_\_\_\_\_ Class Title \_\_\_\_\_ Building \_\_\_\_\_ Fee \_\_\_\_\_

Class # \_\_\_\_\_ Class Title \_\_\_\_\_ Building \_\_\_\_\_ Fee \_\_\_\_\_

Special health concerns (accommodations, disability, allergy, or special need we should be aware of): \_\_\_\_\_

## For Youth Ages 0-18 ONLY

Parent/Guardian Full Name \_\_\_\_\_

Student's Grade \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Male  Female School Attending \_\_\_\_\_

Student Id \_\_\_\_\_

### Discounts

Participant's UCare ID# (if applicable) \_\_\_\_\_ UCare Member Discount Total \$ \_\_\_\_\_

## Payment Information

Total Registration Amount \$ \_\_\_\_\_  Cash  Check - **Payable to Forest Lake Area Schools**

Discover  MasterCard  Visa (please fill out info below)

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Cardholder's First Name \_\_\_\_\_ Cardholder's Last Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Sign up to receive Community Education email news at [www.flaschools.org](http://www.flaschools.org) - click on *Community Education*.

**Mail to: Community Education Department, Forest Lake Area Schools,  
6100 North 210th Street, Forest Lake, MN 55025**