

Respitality South Okanagan Registration Form

2017-2018 Program

Parent(s)/Legal Guardian Names: _____

Address: _____

City _____ Postal Code _____

Telephone Number _____ Cell _____

Email _____

Child's Name _____ Birthdate _____

How much notice do you require for your Respitality Stay?

_____ 24 Hours _____ One week _____ one month

Which days would be most suitable for your Respitality Stay?

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday

_____ Friday _____ Saturday _____ Sunday.

As a Parent/Legal Guardian of _____ (child's name) I confirm that I meet

the eligibility criteria and agree to follow the guidelines as set out by Dragonfly Pond Family Society.

Parent / Legal Guardian

Date

Please return completed Registration and Membership forms to:

Dragonfly Pond Family Society

P.O. Box 24077, Penticton B.C. V2A 2C7