

# NHD Club Registration Form

Student's Name: \_\_\_\_\_

Classroom Teacher: \_\_\_\_\_

Grade: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Class Fee \$100 (Jan. 7 – Feb. 4) / Make check payable to Stacey Trepanier

Parent Signature \_\_\_\_\_

- Check box if your child will be going to aftercare following club.
- Check box if your child is interested in competing beyond school level. (Regionals)

**Registration Due by Tuesday, Dec. 18<sup>th</sup>.**