

LEDYARD YOUTH & SOCIAL SERVICES PACK-IT-BACK-TO-SCHOOL-PROGRAM

Please return form to Ledyard Social Services by Aug. 9, 2018

*** SUPPLIES ARE LIMITED ***

REGISTRATION FORM (please print clearly)

Parent/Guardian's Name _____

Address _____

Contact Phone Number _____

CHILDREN:

First Name	School	Grade	Age	Male	Female
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

