



Galaxy Kids Program
Rockford Elementary Arts Magnet School
7650 Co Rd 50, Rockford, MN 55373
763-477-7555

2016-17 ACTIVITY FORM

Activity Forms are due at least **10 business days prior** to the activity so we can make proper staffing arrangements. Transportation is available for most Rockford Community Education activities.

Child's Name: _____

Activity Attending: _____

Dates/Days of Activity: _____

Times of Activity: _____

Please circle the location of the activity:

REAMS Community Center Middle School High School

Other (Please specify): _____

Do you need us to drop your child off? Yes No

Do you need us to pick your child up? Yes No

Please list any items your child will need to bring for this program or special instructions for staff:

Please register for classes and camps through Rockford Community Education. This form is for Galaxy purposes only.

<p style="text-align: center;">Office Use Only</p> <p>Date in: _____</p> <p>Staff initial: _____</p> <p>Add to Activity Attend Sheet _____</p>
