# LogoLogoYOUNG WOMEN’S CHRISTIAN ASSOCIATION

Cor. Freetown Road and St Thomas Street

Belize City, Belize C.A.

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**SUMMER PROGRAMMEREGISTRATION FORM**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: F M**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age (D/M/Y): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone (home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (work): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (cell): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/ Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(To be completed if applicant is age 16 or under)

**Educational Background & Additional Information**:

**Class Child is promoted to for September 2012**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check the Programme(s) for which you are registering:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Computer** |  | **Day Care** |  |
| **Pre-school** |  | **Arts & Craft** |  |
| **Math & English** |  | **Cosmetology** |  |
| **Reading** |  | **Cake & Pastry Making** |  |
| **Cooking** |  | **Housekeeping** |  |
| **Cake Decorating** |  | **Volleyball** |  |
| **Basketball** |  | **Karate** |  |
| **Sign Language** |  | **Fitness Camp (Teens)** |  |
| **Environmental Tour** |  | **Fitness Camp (Adults)** |  |

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Signature (signature of parent / guardian if child is age 16 or under) Contact Number (parent/ Guardian)

**For administration use only:**

Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_