



## After School Workshops Registration Form Children ages 7-12

Child's Name: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Household email: \_\_\_\_\_

Child's Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Child's School \_\_\_\_\_

Grade or grade equivalent in Fall 2017 \_\_\_\_\_ Sex (check one):  Male  Female

### Session dates April and Tuesdays' and Thursdays'

**Please check appropriate box:**  Member price \$15  Regular price \$20  
 Please Circle the Day of the Week: Tuesdays or Thursdays

**Tuesday-April 4, April 11, April 18, April 25**

**Thursday- April 6, April 13, April 20, April 27**

**Amount enclosed:** \_\_\_\_\_

*Make checks payable to the Noah Webster House.*

Credit card number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

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

**Please send registration and payment to:  
 The Noah Webster House, 227 South Main Street  
 West Hartford, CT 06107  
 Telephone: (860) 521-5362 / Fax: (860) 521-4036**

