

# ST. BONIFACE Kids Klub

## Schedule AUGUST/SEPTEMBER 2021 (Due by August 21<sup>st</sup>)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
<b>AUGUST 30</b> <input type="checkbox"/> After	<b>AUGUST 31</b> <input type="checkbox"/> After	1 <input type="checkbox"/> After	2 <input type="checkbox"/> After	3 <input type="checkbox"/> After
6 <b>NO KIDS KLUB</b>	7 <input type="checkbox"/> After	8 <input type="checkbox"/> After	9 <input type="checkbox"/> After	10 <input type="checkbox"/> After
13 <input type="checkbox"/> After	14 <input type="checkbox"/> After	15 <input type="checkbox"/> After	16 <input type="checkbox"/> After	17 <input type="checkbox"/> After
20 <input type="checkbox"/> After	21 <input type="checkbox"/> After	22 <input type="checkbox"/> After	23 <input type="checkbox"/> After	24 <input type="checkbox"/> After
27 <input type="checkbox"/> After	28 <input type="checkbox"/> After	29 <input type="checkbox"/> After	30 <input type="checkbox"/> After	

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Please Note:**

Monthly calendars and payment are due by the 21<sup>st</sup> of the preceding month (without both, your registration will not be processed). Add-on dates can be done at any point by calling the Rec. Dept. Office (262)250-4710

**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**CANCELLATIONS:** Cancellations will be accepted **5 business days prior to the individual date** (not including the date you are cancelling) a full credit on Rec Dept. account to put towards a future program registration. **Cancellations can only be made by contacting the Rec. Dept. Office at 250-4710.**

**You must call our office to cancel a Kids Klub date your child didn't attend within 2 business days after the cancelled date to receive a credit on Rec. Dept. account for fee paid.**

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
 N112 W17001 Mequon Rd PO Box 337  
 Germantown WI 53022  
**QUESTIONS? CALL:** (262)250-4710

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# ST. BONIFACE Kids Klub

## Schedule OCTOBER 2021 (Due by September 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
				1 <input type="checkbox"/> After
4 <input type="checkbox"/> After	5 <input type="checkbox"/> After	6 <input type="checkbox"/> After	7 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	8 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF
11 <input type="checkbox"/> After	12 <input type="checkbox"/> After	13 <input type="checkbox"/> After	14 <input type="checkbox"/> After	15 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF
18 <input type="checkbox"/> After	19 <input type="checkbox"/> After	20 <input type="checkbox"/> After	21 <input type="checkbox"/> Early Release	22 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF
25 <input type="checkbox"/> After	26 <input type="checkbox"/> After	27 <input type="checkbox"/> After	28 <input type="checkbox"/> After	29 <input type="checkbox"/> After

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release (1<sup>st</sup> child)</b>	_____ days x \$18.00 per day = \$ _____
<b>Early Release (add'l child)</b>	_____ days x \$13.00 per day = \$ _____
<b>Full Day (1<sup>st</sup> child)</b>	_____ days x \$23.00 per day = \$ _____
<b>Full Day (add'l child)</b>	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
 N112 W17001 Mequon Rd PO Box 337  
 Germantown WI 53022  
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# ST. BONIFACE Kids Klub

## Schedule NOVEMBER 2021 (Due by October 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
1 <input type="checkbox"/> After	2 <input type="checkbox"/> After	3 <input type="checkbox"/> After	4 <input type="checkbox"/> After	5 <input type="checkbox"/> After
8 <input type="checkbox"/> After	9 <input type="checkbox"/> After	10 <input type="checkbox"/> After	11 <input type="checkbox"/> After	12 <input type="checkbox"/> After
15 <input type="checkbox"/> After	16 <input type="checkbox"/> After	17 <input type="checkbox"/> After	18 <input type="checkbox"/> After	19 <input type="checkbox"/> After
22 <input type="checkbox"/> After	23 <input type="checkbox"/> After	24 <input type="checkbox"/> EARLY RELEASE	25 <b>NO KIDS KLUB</b>	26 <b>NO KIDS KLUB</b>
29 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	30 <input type="checkbox"/> After			

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release</b> (1 <sup>st</sup> child)	_____ days x \$18.00 per day = \$ _____
<b>Early Release</b> (add'l child)	_____ days x \$13.00 per day = \$ _____
<b>Full Day</b> (1 <sup>st</sup> child)	_____ days x \$23.00 per day = \$ _____
<b>Full Day</b> (add'l child)	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Please Note:**

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**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us

**MAIL/DROP OFF:** Germantown Rec Dept

N112 W17001 Mequon Rd PO Box 337

Germantown WI 53022

**QUESTIONS? CALL:** (262)250-4710

# ST. BONIFACE Kids Klub

## Schedule DECEMBER 2021 (Due by November 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
		1 <input type="checkbox"/> After	2 <input type="checkbox"/> After	3 <input type="checkbox"/> After
6 <input type="checkbox"/> After	7 <input type="checkbox"/> After	8 <input type="checkbox"/> After	9 <input type="checkbox"/> After	10 <input type="checkbox"/> After
13 <input type="checkbox"/> After	14 <input type="checkbox"/> After	15 <input type="checkbox"/> After	16 <input type="checkbox"/> After	17 <input type="checkbox"/> After
20 <input type="checkbox"/> After	21 <input type="checkbox"/> After	22 <input type="checkbox"/> EARLY RELEASE	<b>NO KIDS KLUB</b>	<b>NO KIDS KLUB</b>
27 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	28 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	29 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	30 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	31 <b>NO KIDS KLUB</b>

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release (1<sup>st</sup> child)</b>	_____ days x \$18.00 per day= \$ _____
<b>Early Release (add'l child)</b>	_____ days x \$13.00 per day= \$ _____
<b>Full Day (1<sup>st</sup> child)</b>	_____ days x \$23.00 per day= \$ _____
<b>Full Day (add'l child)</b>	_____ days x \$18.00 per day= \$ _____
<b>TOTAL PAID</b>	\$ _____

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<b><u>Payment Method</u></b> (check one)	
<input type="checkbox"/> Check (payable to Germantown Rec. Dept.)	<input type="checkbox"/> Cash
<input type="checkbox"/> Credit Card	
Card # _____	Exp. Date ____/____
Card Holder Name: _____	
Signature: _____	
<b>EMAIL CALENDAR TO:</b> parkrec@village.germantown.wi.us <b>MAIL/DROP OFF:</b> Germantown Rec Dept N112 W17001 Mequon Rd PO Box 337 Germantown WI 53022 <b>QUESTIONS? CALL:</b> (262)250-4710	

# ST BONIFACE Kids Klub

## Schedule JANUARY 2022 (Due by December 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
3 <b>NO KIDS KLUB</b>	4 <input type="checkbox"/> After	5 <input type="checkbox"/> After	6 <input type="checkbox"/> After	7 <input type="checkbox"/> After
10 <input type="checkbox"/> After	11 <input type="checkbox"/> After	12 <input type="checkbox"/> After	13 <input type="checkbox"/> After	14 <input type="checkbox"/> After
17 <input type="checkbox"/> After	18 <input type="checkbox"/> After	19 <input type="checkbox"/> After	20 <input type="checkbox"/> After	21 NO SCHOOL <input type="checkbox"/> FULL DAY OFF
24 <input type="checkbox"/> After	25 <input type="checkbox"/> After	26 <input type="checkbox"/> After	27 <input type="checkbox"/> After	28 <input type="checkbox"/> After
31 <input type="checkbox"/> After				

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release</b> (1 <sup>st</sup> child)	_____ days x \$18.00 per day = \$ _____
<b>Early Release</b> (add'l child)	_____ days x \$13.00 per day = \$ _____
<b>Full Day</b> (1 <sup>st</sup> child)	_____ days x \$23.00 per day = \$ _____
<b>Full Day</b> (add'l child)	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
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 Germantown WI 53022  
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# ST BONIFACE Kids Klub

## Schedule FEBRUARY 2022 (Due by January 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
	1 <input type="checkbox"/> After	2 <input type="checkbox"/> After	3 <input type="checkbox"/> After	4 <input type="checkbox"/> After
7 <input type="checkbox"/> After	8 <input type="checkbox"/> After	9 <input type="checkbox"/> After	10 <input type="checkbox"/> After	11 NO SCHOOL  <input type="checkbox"/> FULL DAY OFF
14 NO SCHOOL  <input type="checkbox"/> FULL DAY OFF	15 <input type="checkbox"/> After	16 <input type="checkbox"/> After	17 <input type="checkbox"/> After	18 <input type="checkbox"/> After
21 <input type="checkbox"/> After	22 <input type="checkbox"/> After	23 <input type="checkbox"/> After	24 <input type="checkbox"/> After	25 <input type="checkbox"/> After
28 <input type="checkbox"/> After				

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release (1<sup>st</sup> child)</b>	_____ days x \$18.00 per day = \$ _____
<b>Early Release (add'l child)</b>	_____ days x \$13.00 per day = \$ _____
<b>Full Day (1<sup>st</sup> child)</b>	_____ days x \$23.00 per day = \$ _____
<b>Full Day (add'l child)</b>	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

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**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
 N112 W17001 Mequon Rd PO Box 337  
 Germantown WI 53022  
**QUESTIONS? CALL:** (262)250-4710

# ST. BONIFACE Kids Klub

## Schedule MARCH 2022 (Due by February 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
	1 <input type="checkbox"/> After	2 <input type="checkbox"/> After	3 <input type="checkbox"/> After	4 <input type="checkbox"/> After
7 <input type="checkbox"/> After	8 <input type="checkbox"/> After	9 <input type="checkbox"/> After	10 <input type="checkbox"/> After	11 <input type="checkbox"/> After
14 <b>NO SCHOOL</b> <input type="checkbox"/> FULL DAY OFF	15 <input type="checkbox"/> After	16 <input type="checkbox"/> After	17 <input type="checkbox"/> After	18 <input type="checkbox"/> After
21 <input type="checkbox"/> After	22 <input type="checkbox"/> After	23 <input type="checkbox"/> After	24 <input type="checkbox"/> After	25 <input type="checkbox"/> After
28 <input type="checkbox"/> After	29 <input type="checkbox"/> After	30 <input type="checkbox"/> After	31 <input type="checkbox"/> After	

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Full Day (1<sup>st</sup> child)</b>	_____ days x \$23.00 per day = \$ _____
<b>Full Day (add'l child)</b>	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us

**MAIL/DROP OFF:** Germantown Rec Dept  
N112 W17001 Mequon Rd PO Box 337  
Germantown WI 53022

**QUESTIONS? CALL:** (262)250-4710

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# ST. BONIFACE Kids Klub

## Schedule APRIL 2022 (Due by March 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
				1 <input type="checkbox"/> After
4 <input type="checkbox"/> After	5 <input type="checkbox"/> After	6 <input type="checkbox"/> After	7 <input type="checkbox"/> After	8 <input type="checkbox"/> After
11 <input type="checkbox"/> After	12 <input type="checkbox"/> After	13 <input type="checkbox"/> After	14 <input type="checkbox"/> EARLY RELEASE	15 NO SCHOOL NO KIDS KLUB
18 NO SCHOOL <input type="checkbox"/> FULL DAY OFF	19 NO SCHOOL <input type="checkbox"/> FULL DAY OFF	20 NO SCHOOL <input type="checkbox"/> FULL DAY OFF	21 NO SCHOOL <input type="checkbox"/> FULL DAY OFF	22 NO SCHOOL <input type="checkbox"/> FULL DAY OFF
25 <input type="checkbox"/> After	26 <input type="checkbox"/> After	27 <input type="checkbox"/> After	28 <input type="checkbox"/> After	29 <input type="checkbox"/> After

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release (1<sup>st</sup> child)</b>	_____ days x \$18.00 per day = \$ _____
<b>Early Release (add'l child)</b>	_____ days x \$13.00 per day = \$ _____
<b>Full Day (1<sup>st</sup> child)</b>	_____ days x \$23.00 per day = \$ _____
<b>Full Day (add'l child)</b>	_____ days x \$18.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

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**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
 N112 W17001 Mequon Rd PO Box 337  
 Germantown WI 53022  
 2920 **QUESTIONS? CALL:** (262)250-4710



# ST. BONIFACE Kids Klub Schedule MAY 2022 (Due by April 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
2 <input type="checkbox"/> After	3 <input type="checkbox"/> After	4 <input type="checkbox"/> After	5 <input type="checkbox"/> After	6 <input type="checkbox"/> After
9 <input type="checkbox"/> After	10 <input type="checkbox"/> After	11 <input type="checkbox"/> After	12 <input type="checkbox"/> After	13 <input type="checkbox"/> After
16 <input type="checkbox"/> After	17 <input type="checkbox"/> After	18 <input type="checkbox"/> After	19 <input type="checkbox"/> After	20 <input type="checkbox"/> After
23 <input type="checkbox"/> After	24 <input type="checkbox"/> After	25 <input type="checkbox"/> After	26 <input type="checkbox"/> After	27 <input type="checkbox"/> After
30 <b>NO KIDS KLUB</b>	31 <input type="checkbox"/> After			

<b>After School TOTAL PAID</b>	_____ days x \$9.00 per day = \$ _____ \$ _____
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**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us

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N112 W17001 Mequon Rd PO Box 337  
Germantown WI 53022

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# ST. BONIFACE Kids Klub

## Schedule JUNE 2022 (Due by May 21st)

Child's Name: \_\_\_\_\_ Parent's Names: \_\_\_\_\_ Cell #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ For Receipts Email: \_\_\_\_\_

**Please select dates your child(ren) will be attending Kids Klub**

Monday	Tuesday	Wednesday	Thursday	Friday
		1	2	3
		<input type="checkbox"/> After	<input type="checkbox"/> After	<input type="checkbox"/> After
6	7	8	9	10 NO SCHOOL
<input type="checkbox"/> After	<input type="checkbox"/> After	<input type="checkbox"/> After	<input type="checkbox"/> Early Release	<input type="checkbox"/> FULL DAY OFF

<b>After School</b>	_____ days x \$9.00 per day = \$ _____
<b>Early Release (1<sup>st</sup> child)</b>	_____ days x \$18.00 per day = \$ _____
<b>Early Release (add'l child)</b>	_____ days x \$13.00 per day = \$ _____
<b>TOTAL PAID</b>	\$ _____

**Please Note:**

Monthly calendars and payment are due by the 21<sup>st</sup> of the preceding month (without both, your registration will not be processed). Add-on dates can be done at any point by calling the Rec. Dept. Office (262)250-4710

**CANCELLATIONS:** Cancellations will be accepted 5 business days prior to the individual date (not including the date you are cancelling) a full credit on Rec Dept. account to put towards a future program registration. Cancellations can only be made by contacting the Rec. Dept. Office at 250-4710.

You must call our office to cancel a Kids Klub date your child didn't attend within 2 business days after the cancelled date to receive a credit on Rec. Dept. account for fee paid.

Each child will receive 1 flexible cancellation day per month to receive a household credit (not refund) even after our typical cancellation policy. Cancellations can only be made by contacting the Rec. Dept. Office at 250-4710 no later than 2 business days after your desired cancellation date (not via email or through staff at your site)

**Payment Method** (check one)

Check (payable to Germantown Rec. Dept.)     Cash

Credit Card

Card # \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_

Card Holder Name: \_\_\_\_\_

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

**EMAIL CALENDAR TO:** parkrec@village.germantown.wi.us  
**MAIL/DROP OFF:** Germantown Rec Dept  
 N112 W17001 Mequon Rd PO Box 337  
 Germantown WI 53022  
**QUESTIONS? CALL:** (262)250-4710