

Redwood County Fair Daycare Day Registration Form

*Deadline to Register for free admission: Friday June 30th, 2017



Redwood County Extension Office PO Box 130

Redwood Falls, MN 56283 507-637-4025 or joh15047@umn.edu for more information

When we receive your form we will e-mail you a gate pass and your schedule! We look forward to seeing you on Friday, July 14th, from 8:30am-1:00 pm

Name of Daycare/Program:		
Contact Person Information: Name:		
Address:		
Email Address:	Phone:	
Our Daycare/Program Will Be Staying For Lunch We will be offering (2) different meal choices for each Choice 1: Hotdog w/bun, carrot sticks w/ranch, water Choice 2: Meat and cheese slices with whole grain cracoupon.	h individual: melon, milk or water, and	
How many for Meal Choice 1: \square Meal Choice 2:		
Our Daycare/Program Would Like A 4-H Ambass	ador Escort: YES or N	Ю
Please list any adults that will be attending with you. (We recon	nmend 1 chaperone per 5 childr	ren under age 5).
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Please list all children attending. Please round their	r age.	
Name	Age	Parent/Guardian Approves Program Attendance:

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