## RED WING COMMUNITY EDUCATION • RECREATION REGISTRATION

NAME (one per line)	CLASS#	CLASS	NAME	YOUTH	ADULT	SR.	COST
	+						
							1
					TOTAL S	\$	
PARENTS/PAYER							
ADDRESS							
Street		City			State	Zi	ip
PHONE(H)	(W)	E	-MAIL (ADDRES	·s)			
MAKE CHECKS PAYABLE TO:		RICT #256					
RETURN TO:	COMMUNITY EDUCATION 2451 Eagle Ridge Driv				e Red Wing, MN. 55066		
Method of Payment:							
Cash (please send no cash through	the mail)	Check or	money order	Check	: #		
Credit Card:	Visa	Masterca	rd UCare/S	South Country #	#		
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Credit Card #					Exp. Date		
Signature				Date			
RED WING COMMUN	ITY EDUCATION	•	RECREA	ATION RE	GISTRA'	TION	
NAME (one per line)	CLASS#	CLASS	NAME	YOUTH	ADULT	SR.	COST
					]		1
					TOTAL S	\$	
PARENTS/PAYER							
ADDRESS							
Street		City			State	Zi	ip
PHONE(H)	( <b>W</b> )	E	-MAII. (ADDRES	ss)			
MAKE CHECKS PAYABLE TO:	SCHOOL DISTRIC		WITTE (ADDRES				
RETURN TO:	COMMUNITY ED	UCATION 2	2451 Eagle	Ridge Drive	Red Wing	g, MN. 55	5066
Method of Payment:							
Cash (please send no cash through	the mail)	Check or	money order	Check	:#		
Credit Card:	Visa	Masterca	rd UCare	South Country	#		
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	=		<del></del>		Exp. Date		
Acut Calu #					Exp. Date		
Signature				Date			