

**CITY OF
NIAGARA FALLS
14TH ANNUAL EGGSTRAVAGANZA**



EASTER EGG HUNT PRE-REGISTRATION FORM

NAME _____

ADDRESS _____

DATE OF BIRTH _____ AGE _____ GRADE _____

TELEPHONE _____

PARENT OR GUARDIAN SIGNATURE _____

PLEASE USE ONE FORM PER CHILD.

RESTRICTED TO FIRST 100 CHILDREN PER AGE GROUP.
THE REGISTRATION FORM MUST BE RETURNED TO
1785 NEW ROAD, BY MARCH 18, 2013- 3:30PM.

THIS INCLUDES ALL ON-LINE PRE-REGISTRATION FORMS.
REGISTRATION/SIGN IN BEGINS 9:30 ON DAY OF EVENT
BY SIGNING THIS FORM YOU GIVE THE CITY OF NIAGARA
FALLS PERMISSION TO PHOTOGRAPH YOUR CHILD FOR
PROMOTIONAL PURPOSES.

On- line pre-registration please circle the age group for this youth.

AGE: 1-2 3-4 5-7 8-10