



MDCFAPA presents



REGISTRATION #: \_\_\_\_\_ FOSTER: \_\_\_\_\_ ADOPT: \_\_\_\_\_ RELATIVE: \_\_\_\_\_

# FAMILY DAY END OF SCHOOL OUTING

(Adoptive, foster, relative caregivers)

## SATURDAY JUNE 1, 2024 10:30AM – 4:00PM

### AD Barnes Park 340 SW 72 Ave Doral 33155 Pavilion “3”

Is anyone graduating from elementary,  
middle or senior school?

Who: \_\_\_\_\_  
from what: \_\_\_\_\_

#1 ADULT NAME: \_\_\_\_\_

#2 ADULT NAME: \_\_\_\_\_

TELE: \_\_\_\_\_

NORTH DADE: \_\_ CENTRAL DADE: \_\_ SOUTH DADE: \_\_

EMAIL: \_\_\_\_\_

**BOYS:**

#1 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

#2 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

# 3 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

# 4 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

# 5 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

**GIRLS:**

#1 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

#2 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

#3 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

# 4 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

# 4 FIRST NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

TOTAL # OF ADULTS: \_\_\_\_\_

REGISTERED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

TOTAL # OF YOUTH: \_\_\_\_\_

CONFIRMED BY: \_\_\_\_\_ DATE: \_\_\_\_\_