

Registration Payment Form

Whitney Ranch Recreation Center-On the Go

Sept 2018

Please mail to: Therapeutic Recreation & Inclusion Services Respite Users: Walk in/Call/Fax TRIS

280 S. Water St., Henderson NV 89015

TRIS Phone: 702-267-4065

Postmarks will not be honored

TRIS fax: 702-267-4101

Walk in: **TRIS office or any recreation center**

Online: cityofhenderson.com

Email : TherapeuticRec@cityofhenderson.com

Registration Dates: Aug. 9-23, 2018 by 5pm



Name:	Parent/Guardian Name: First Last
Street Address:	Phone number:

To register place "x" in boxes below	Activity-Date	Activity-Number	Price	Non-Resident Price	Time	Description
	Monday 9/3					NO PROGRAM-LABOR DAY
	Tuesday 9/4	#492156-15	\$12.38	\$14.24	1:30-6:00 p.m.	Springs Preserve
	Wednesday 9/5	#492156-16	\$11.00	\$12.65	1:45-5:30 p.m.	Gardening
	Thursday 9/6	#492156-17	\$11.00	\$12.65	1:45-5:30 p.m.	Swimming
	Friday 9/7	#492156-18	\$11.00	\$12.65	1:45-5:30 p.m.	Arts & Crafts
	Monday 9/10	#492156-19	\$11.00	\$12.65	1:45-5:30 p.m.	Bowling
	Tuesday 9/11	#492156-20	\$11.00	\$12.65	1:45-5:30 p.m.	Fitness Day
	Wednesday 9/12	#492156-21	\$11.00	\$12.65	1:45-5:30 p.m.	Water Reclamation Facility
	Thursday 9/13	#492156-22	\$11.00	\$12.65	1:45-5:30 p.m.	Swimming
	Friday 9/14	#492156-23	\$11.00	\$12.65	1:45-5:30 p.m.	Arts & Crafts
	Monday 9/17	#492156-24	\$11.00	\$12.65	1:45-5:30 p.m.	Bowling
	Tuesday 9/18	#492156-25	\$11.00	\$12.65	1:45-5:30 p.m.	Grocery Shopping
	Wednesday 9/19	#492156-26	\$11.00	\$12.65	1:45-5:30 p.m.	Gardening
	Thursday 9/20	#492156-27	\$11.00	\$12.65	1:45-5:30 p.m.	Swimming
	Friday 9/21	#492156-28	\$11.00	\$12.65	1:45-5:30 p.m.	Chef Day
	Monday 9/24	#492156-29	\$11.00	\$12.65	1:45-5:30 p.m.	Bowling
	Tuesday 9/25	#492156-30	\$11.00	\$12.65	1:45-5:30 p.m.	Chef Day
	Wednesday 9/26	#492156-31	\$11.00	\$12.65	1:45-5:30 p.m.	Republic Services
	Thursday 9/27	#492156-32	\$11.00	\$12.65	1:45-5:30 p.m.	Swimming
	Friday 9/28	#492156-33	\$11.00	\$12.65	1:45-5:30 p.m.	Scrapbooking

I agree that all the terms of the release on the information form apply

Parent/Guardian Signature _____ Date _____

Total Payment Due: _____	Method of Payment Type Accepted:										
<p>When faxing a respite or registration form, please note that credit card information is no longer accepted on this form. Please contact our office for verification and payment processing.</p>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20px; border: 1px solid black; height: 15px;"></td> <td>Cash (exact cash only)</td> </tr> <tr> <td style="border: 1px solid black; height: 15px;"></td> <td>Check/Money Order# _____</td> </tr> <tr> <td style="border: 1px solid black; height: 15px;"></td> <td>Respite</td> </tr> <tr> <td style="border: 1px solid black; height: 15px;"></td> <td>Acumen</td> </tr> <tr> <td style="border: 1px solid black; height: 15px;"></td> <td>Olive Crest</td> </tr> </table>		Cash (exact cash only)		Check/Money Order# _____		Respite		Acumen		Olive Crest
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