

## **CT Old State House February 2010 Event Registration Form**

Name of Child/ren:

Age/s of Child/ren:

Grade/s:

Parent/ Guardian:

Permission to photograph (By signing below, you give permission to photograph and/or take video of your child/ren):

Home phone number:

Phone Number to contact you during program:

Allergies (List with child/ren's name below):

Name of person picking child up:

Email Address:

Mailing Address:

Date of Program chosen:

Drop-off Instructions: Kids to be dropped off at School Tour entrance and signed in by 10 AM.

Cost: \$5 per child per program

Please return with check or money order made out to the "Office of Legislative Management" by February 10, 2010.

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