

MORGAN'S WONDERLAND APPLICATION

Full Name:	
Address:	
Cell Number:	
Are you 18 or Over:	
Permission for a Security Check:	
Are you 16-17 Years of Age:	
Parents Name (16-17 Years of Age):	
Parents Signature (16-17 Years of Age):	
Name of Rotary Club:	
Interact School Program you are Part of:	
Please Circle One of Following Shifts:	4p-6:30p
	6:15p-9p
	Both Shifts
Your Signature:	
Date Signed:	

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Email to BOTH Addresses Please:	joannbrowne1@gmail.com AND 5840dg2012@gmail.co

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