

# Spring Fling Mail-In Registration

Please submit this completed form to the address below by

**May 3rd**

UW-Extension Spring Fling

301 Washington St

Oconto, WI 54153

**MAQA** Yes \_\_\_\_\_ No \_\_\_\_\_

**Cloverbud Mini-Camp** Yes \_\_\_\_\_ No \_\_\_\_\_

**Youth Officer Training** Yes \_\_\_\_\_ No \_\_\_\_\_

**Volunteer Orientation** Yes \_\_\_\_\_ No \_\_\_\_\_

**Session 1** \_\_\_\_\_

**Session 2** \_\_\_\_\_

**Session 3** \_\_\_\_\_

**Session 4** \_\_\_\_\_

**Session 5** \_\_\_\_\_

**Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Lunch Choice:**      **Hotdog**      **Sloppy Joe**      **None**

*Online Registration*

*Fill-in and email to:*

***arvilla.rusnak@co.oconto.wi.us***

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Please make requests at least 10 days preceding the scheduled program,