

BALDWIN-WOODVILLE COMMUNITY EDUCATION REGISTRATION FORM

Mail to : 1000 13th Ave., Baldwin, WI 54002

Name _____
Parent's Name (if under 18) _____
Address _____
City _____ Zip _____
Email Address _____
Phone (H) _____ (W) _____

Course Name Start Date Fee
1. _____
2. _____
3. _____

Amount Enclosed _____ Check number _____

Signature of Participant: _____
(Parent/Guardian if under 18)

Please use a separate form for each participant.

Make checks payable to:

Baldwin-Woodville Community Education

For More Information
call 715-688-6200
or visit
bwsd.k12.wi.us/community



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