

MANNEQUIN MODELING

PRE-REGISTRATION FORM

Return by: July 7th
Bonnie Moore, 4-H Office
Cornell Cooperative Extension
28 Parkside Drive
Ellicottville, NY 14731-9707



Name(s):

CLUB

NAME: _____

Dates: MONDAY, TUESDAY, WEDNESDAY, THURSDAY, FRIDAY, SATURDAY

Times: 11 a.m. - 12 Noon, 12 Noon - 1 p.m., 1 p.m. - 2 p.m., 2 p.m. - 3 p.m., 3 p.m. - 4 p.m.,

5 p.m. - 6 p.m., 6 p.m. - 7 p.m.

Leader's Signature: _____

