



Limitless OPPORTUNITIES
FOR SPECIAL PEOPLE

2018 TASK WINTER 1 REGISTRATION FORM
TASK, 980 Horan Drive, Fenton, Missouri 63026

2018 TASK WINTER SESSION 1 ACTIVITIES

BOWLING

All Ages	Tuesdays	4:30-5:30	Jan 9, 16, 23, 30 Feb 6, 13
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BASKETBALL

Ages: 5-7 and 8-12	Wednesdays	5:30-6:30	Jan 10, 17, 24, 31, Feb 7, 14
Ages 13-18 and 19+	Wednesdays	6:30-7:30	

ZUMBA

Ages: 5-7 and 8-12	Thursday	5:30-6:30	Jan 11, 18, 25, Feb 1, 8, 15
Ages 13-18 and 19+	Thursday	6:30-7:30	

SOCIAL CLUBS

Ages 15+	Fridays	6:00-9:00pm	\$15	Jan 5, Feb 2, Mar 2
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PLEASE NOTE: Time and sessions may be changed based on registrations.
Please register by deadlines to avoid \$10 late fee.

See website at www.TaskSports.org for program descriptions.



Remember: If inclement weather occurs (snow/ice, rain or heat etc.) call the weather line at 636.343.8275, watch KSDK alerts or sign up for text notifications (at events).

To sign up for alerts send the text "@TASKNEWS" to #22828



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2018 TASK WINTER 1 REGISTRATION FORM

TASK, 980 Horan Drive, Fenton, Missouri 63026

BOWLING

Fee: \$60
Tuesdays

Ages: 5-7
 Ages: 8-12
 Ages: 13-18
 Ages: 19+

BASKETBALL

Fee: \$60
Wednesdays

Ages: 5-7
 Ages: 8-12
 Ages: 13-18
 Ages: 19+

ZUMBA

Fee: \$60
Thursdays

Ages: 5-7
 Ages: 8-12
 Ages: 13-18
 Ages: 19+

SOCIAL CLUB 15+

Fee: \$15
Fridays

January
 February
 March
 April
 May

REGISTRATION CLOSING Jan 2 (AFTER DEADLINE A \$10 LATE FEE APPLIES)

- I have attached my 2018 TASK Application
- I have filled out my 2018 TASK Application on line
- I have already turned in a 2018 Application

Participant's First Name

Participant's Last Name

Birth Date _____ Age _____

Gender Male Female

Shirt Size: CS CM CL AS AM AL AXL A2XL A3XL

PAYMENT TYPE:

Choose a payment option:

- I have enclosed my payment. (Checks payable to TASK)
- Bill my credit card \$_____ (MasterCard, Visa, and Discover).

Credit Card Only

For Credit Card

Card Type Visa MasterCard Discover

Card Number _____ - _____ - _____ - _____

Expires (MM/YY) _____ / _____

Cardholder's Signature _____ Date _____ Zip _____

OFFICE USE ONLY

Date Rec'd _____ Amount _____ Cash Check # Credit Card