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PFC P.O. Box 71, Dodge Center, MN 55927

Registration Form

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Parent/Guardian Name | |  | | | |
| Address | Street: | | | | City: |
| Phone: | | | | | |
| Child Name (first and last) | | Age | Grade | Add any information we should be aware of (i.e. allergies etc.) | |
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Complete this form and email to pfc@pfc-of-dc.org