



Registration Form

City of Sacramento
Department of Parks and Recreation

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Emergency Contact:

Name _____ Phone _____

Relation _____

I have read and understand the rules of the 28th and B Street Skate Park.

Signature _____ Date _____



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Peb hais lus Hmoob
Chúng tôi nói tiếng Việt