



**Application for  
S.K.A.T.E.  
Sponsoring kids at the edge**

The S.K.A.T.E. program is designed to assist parents or guardians pay for part or all of: afterschool program and camps. All information regarding your application to the S.K.A.T.E. program will be kept in strict confidence with Julie and Charles, unless you allow us to share it with the individuals, businesses, and churches that are sponsoring the S.K.A.T.E. program.

Parent / Guardian First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

Children that you are requesting to enter S.K.A.T.E.

Name	Age	Birth Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Why are you requesting your child / children to the S.K.A.T.E. program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you attend / are members of a local church? \_\_\_\_\_  
If so name, address, phone number of the church \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you and the skater attend skate church at the Park? \_\_\_\_\_



I give permission for this information to be shared with people, business, and churches that are sponsoring the S.K.A.T.E. program.

**Requestors Signature** \_\_\_\_\_