

# KARE KITS

KENAN ARTS RECREATION & EDUCATION



## HOW DO I GET A KARE KIT?

EMAIL US, CALL US or STOP BY!: Please complete this Registration Form and email to [info@kenancenter.org](mailto:info@kenancenter.org). You can provide payment information on registration form or online through Kenan Center's PayPal Account ([paypal.com/paypalme/kenanlockport](https://paypal.com/paypalme/kenanlockport)). You can also place an order over the phone by calling 716-433-2617.

PLEASE CHECK WHICH KARE KIT YOU'D LIKE TO PURCHASE!



SEPTEMBER  
SCHOOL SPIRIT  
\$15



OCTOBER  
SPOOKTACULAR  
\$15



NOVEMBER  
GATHER & GOBBLE  
\$20



DECEMBER  
HOLIDAYS AROUND  
THE WORLD  
\$20\*

\* Presale order only. Available December 7

Parent Name	Date
Parent Email	Phone
Home Address	City, State Zip
Children's Names (First & Last), Ages	
Does your child have any allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, what?



**PAYMENT INFORMATION**

Please send form and payment to Kenan Center 433 Locust St Lockport, NY 14094. Payment can be made by check, credit card or online at [paypal.me/kenanlockport](https://www.paypal.me/kenanlockport). A completed and signed form is required for purchase.

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Code: \_\_\_\_\_

**WAIVER**

I, the undersigned parent/guardian of \_\_\_\_\_ (child's name), do hereby grant permission to agree to be legally and financially responsible, and agree to hold harmless the Kenan Center and its officers, agents and employees, from any and all claims or actions arising against or in favor of my child or myself as a result of any act by, or event, occurrence, or accident, happening to my child. I hereby give my permission for photographs and/or videos of my child to be used in materials.

\_\_\_\_\_  
Parent/Guardian Name (PRINT)

\_\_\_\_\_  
Signature

Office Use Only

Payment Type: \_\_\_\_\_ Payment Date: \_\_\_\_\_ Bus Office: \_\_\_\_\_ AM: \_\_\_\_\_