



# **BABES IN THE WOODS FALL 2023**

*August 8*

*September 12*

*October 10*

*November 14*

**SECOND TUESDAY OF EACH MONTH**

*Babes in the Woods is a 1 hour long program for 2-5 year olds. Children will discover nature through stories, nature hikes, crafts, games, and more.*

*Each month we will explore a different theme.*

**Ages: 2-5 (plus a caregiver)**

**Location: Hoover Forest Preserve**

**Time: 10:00-11:00am**

**Price: \$6 per child**

*To register: Complete the attached registration form  
and return to [KAdamse@KendallCountyIL.gov](mailto:KAdamse@KendallCountyIL.gov)*



# KENDALL COUNTY FOREST PRESERVE DISTRICT

## GENERAL/PUBLIC REGISTRATION FORM

110 West Madison St., Yorkville, IL 60560 (630) 553-2292 or

e-mail: [kcfpdeducation@kendallcountyil.gov](mailto:kcfpdeducation@kendallcountyil.gov)

Program Name: \_\_\_\_\_ Total Fee \$ \_\_\_\_\_

Program Date: \_\_\_\_\_ & Time: \_\_\_\_\_

Any additional dates you are registering for: \_\_\_\_\_

### Participant Information

Contact (Adult) Name: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Total # of people participating? \_\_\_\_\_

#

List all of the family members below:

Name: _____	Circle: Adult or Child? _____	Child: Date of Birth: _____
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Name: _____	Circle: Adult or Child? _____	Child: Date of Birth: _____
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Name: _____	Circle: Adult or Child? _____	Child: Date of Birth: _____
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Name: _____	Circle: Adult or Child? _____	Child: Date of Birth: _____
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Name: _____	Circle: Adult or Child? _____	Child: Date of Birth: _____
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### Credit Card Payment Form, Card Payments are accepted for this Program.

Visa, MasterCard, Discover (2.5% Processing Fee is Applied)

Name on card: \_\_\_\_\_

Billing address: \_\_\_\_\_

City: _____	State: _____	Zip: _____
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Card number: \_\_\_\_\_

Security Code (on back): _____	Expiration Date: _____
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I authorize Kendall County Forest Preserve District to charge my credit card the amount indicated on the dates as noted.

Signature: \_\_\_\_\_

Office Use: Date Received: \_\_\_\_\_ Date Registered: \_\_\_\_\_ Initials: \_\_\_\_\_ Confirmation Email Sent: \_\_\_\_\_