

2009 Tractor Safety Registration Form (Please print clearly & copy form as needed)

Name _____ Phone _____

Parent/Guardian _____

Address _____
(Street or PO Box) (City, State and Zip)

Date of Birth _____ Sex _____ Grade _____ School _____
(Month-Day-Year) (Male or Female)

Optional: Do you live on a farm? _____

Do you have a disability? _____

Ethnic Origin _____

Return form along with \$60 by **Friday, March 20, 2009**

Mail to:

MSU Extension – Leelanau County

Make checks payable to: MSU Extension

8527 E. Government Center Dr., # 107

Suttons Bay, MI 49682

Registration fee is non-refundable

(unless class is cancelled due to low enrollment)