ECFE Registration ~ FALL/WINTER 2026

1. Complete form below. Indicate the children attending Classes or Events.
2. **Include fee (check payable to ECFE).** Please notify the office staff if you are in need of a waiver.
3. Mail registration to: Colvill Family Center, 269 E. 5th St., Red Wing, MN 55066
4. Phone in registration at 651/385-8000.
5. **Mail or Fax immunizations to Colvill at 651/385-4780.**
6. You will be notified **ONLY** if a class is full or cancelled.
7. Please note the Student/Parent Illness information on page 2.

Parent/s Name:_____ Home #:_____ Cell # _____

Address:_____ Email (required):_____

Method of Payment:

_____ Check _____ Cash (no cash through the mail) _____ Fee Waiver (I cannot afford to pay)

___Visa ___ MC ___Disc Name on Card _____

Card # _____-_____-_____-_____ Exp. Date:_____/_____ Code _____

Cardholder Signature: _____

___ **Child's** South Country Alliance ID#:_____ (does not cover Special Events)

Parent/Adult Attending Class: _____ **Phone Number**_____

Child's Full Legal Name: _____ **Birth Date:** _____ **Gender: M/F**
(First, Middle, Last Name)

Child's Full Legal Name: _____ **Birth Date:** _____ **Gender: M/F**
(First, Middle, Last Name)

Class/Event #	Class/Event Title	Child/ren Attending	Fee

****If the lottery drawing does not include you, do you have another class choice?** _____

Publicity Permission/Denial

Registering for an ECFE class allows the Red Wing School District to include your child's photo in newspaper, radio or TV publicity/marketing unless you sign below.

I do ***NOT*** give permission for my child's photo to be used.

_____
Parent's Signature/Date *(Please sign only if you are declining use of pictures.)*

* Registration for Community Connections is coordinated through Amy M. with Goodhue County Social Services. For registration and/or additional information, please contact Amy/Goodhue County Social Services at 651-385-3200 or call Colvill at 651-385-8000.