**Community Group Programs Registration Form**

**Community Organization Information**

Organization Name:

Program Name:

Age of Participants:

Contact Name:

Address, City and Zip:

Phone: Fax:

E-mail:

Category:

501 c3 Non-profit [ ]

Government Agency [ ]

Public School [ ]

Other (please specify) [ ]

Organization Budget:

 $50,000 - $99,999 [ ]

$100,000 - $499,999 [ ]

$500,000 - $999,999 [ ]

$1,000,000 - $4,999,999 [ ]

$5,000,000 + [ ]

Does your organization need a scholarship to attend a Community Group Program?

[ ]  Yes [ ]  No

If yes, what percent of the youth you serve receive Free/Reduced Lunch? %

**Crissy Field Center Community Group Program (CGP) Request**

Name of Requested (CGP) Program:

Requested Date(s):

Time Requested: FROM a.m. / p.m TO a.m. / p.m

Program will be at [ ]  the Golden Gate National Recreation Area (GGNRA)

 [ ]  Site/Facility of Community Organization

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Please indicate your mode of transportation for your fieldtrip to the GGNRA:

[ ]  MUNI [ ]  Personal or Organizational Vehicles

[ ]  Chartered Bus/Shuttle [ ]  Other:

# of Youth Participants (including junior counselors):

# of Adult Staff: # of Adult Volunteers:

Will you be recreating in the park before or after your requested program?

Notes/ Special Needs/ Accomodation Requests

**Please mail, fax, or email completed registration form to:**

Crissy Field Center
1199 East Beach, Presidio
San Francisco, CA 94129
Attn: Community Group Programs
Fax: (415) 561-7695
Email: PLee@parksconservancy.org