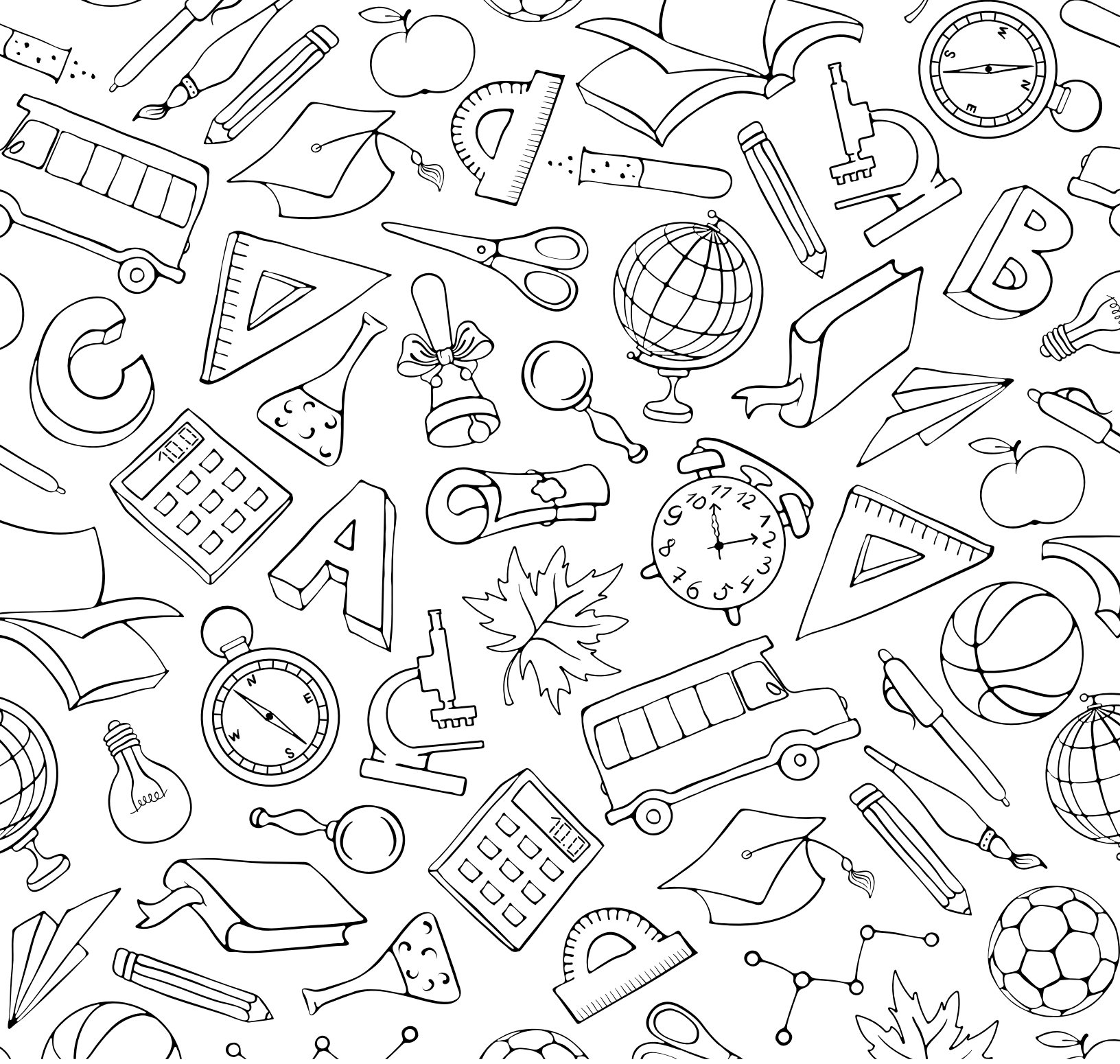
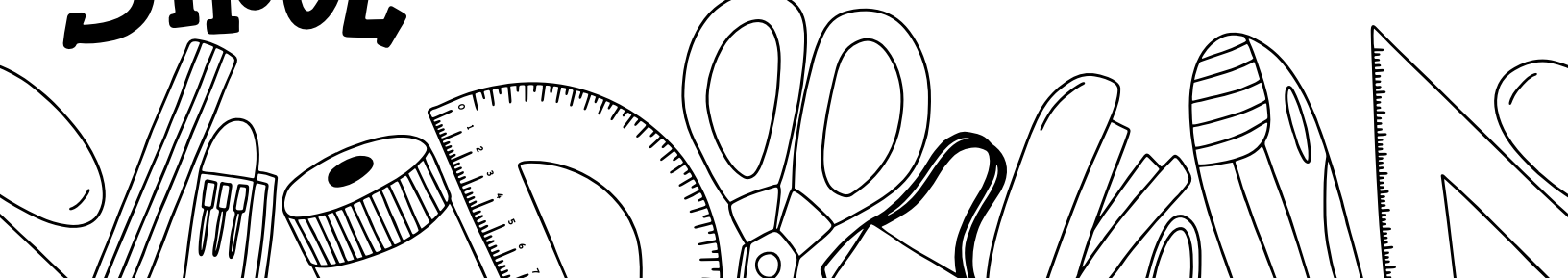


BACK TO SCHOOL

Name ----------

Parent/Guardian ----------

Contact # ----------

COMMUNITY LIVING
Owen Sound and District