



Registration Form

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____(h) _____(c)

Email _____

Age _____ Grade _____ Birthday _____

Church Affiliation _____

Parent / Guardian _____

Brought By (if other than parent) _____

Emergency Contact _____

Salvation Date _____

Child May Be Picked Up By The Following : (other than parents)

Parent Signature _____

Date _____

