Aberdeen Baptist Church

733 US Rte 52 E PO Box 529 Aberdeen, OH 45101 Church: 937-795-2334

Website: www.aberdeenbaptist.com

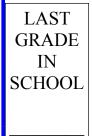


INVEST...INVITE... INVOLVE

Sunday School Sunday Morning Worship Sunday Evening Worship 9:45 AM 10:45 AM 7:00 PM

Wednesday Prayer Meeting, Youth, RA's, GA's, MF's, TeamKid

7:00 PM



Children's Ministry & VBS Registration Form

Child's Full Name(La	ast)	(First)	(N	Middle)	-
☐ Male ☐ Female		. ,	·	,	
Parent or Legal Guardian					
Home Address					
Home Phone ()				e()	
If not available in an eme					
1. Name	Phone	e()			
2. Name					
Does your child have any	allergies to Food	☐ Medications	☐ Insect Bites	□ Other	
If yes, please explain:					
Does your child have any diabetes, frequently upset ☐ Yes ☐ No If yes, des	stomach or other whi	ch would have an		1 2	roblems
Does your child currently	take any medications	? If so, describe			_
Are there any activities to	be restricted for this	child? Yes No			-
Who is authorized to pick	up your child from C	hurch activities?			-
Do you give permission f	for your child to be in p	photographs & sna	pshots during Chu	rch activities? Yes	□ No
Do you give permission f	or you child's photo's	to be placed in the	photo album on C	hurch website? Yes	□ No
Do you attend Sunday Sc If you are visiting our Ch	hool and Church regulurch, are you a guest of	larly? If so, where of someone?			-
In the event of an emergent cannot be contacted, the period of the child. I understand I am	person/s in charge from	n the Church have	my permission to		
Parent/ Legal Guardian S	ignature [.]			Date:	