

# 2009 / 2010 Church School Registration

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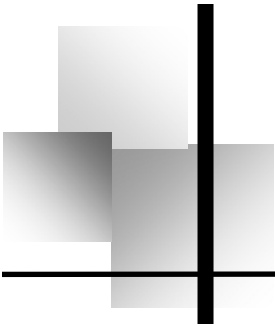
Parents Names:	
Address:	
Phone Number:	
Emergency / Cell Phone Number:	
E-Mail Address:	

### CHILD NUMBER 1

Name:		Age:
Address:		
Birth date:	Grade in September:	Baptized:    Yes    No
Name and Address of Church Child was Baptized in:		
List Any Allergies:		
Additional information we should know:		

### CHILD NUMBER 2

Name:		Age:
Address:		
Birth date:	Grade in September:	Baptized:    Yes    No
Name and Address of Church Child was Baptized in:		
List Any Allergies:		
Additional information we should know:		



# 2009 / 2010 Church School Registration

CHILD NUMBER 3		
Name:	Age:	
Address:		
Birth date:	Grade in September:	Baptized: Yes No
Name and Address of Church Child was Baptized in:		
List Any Allergies:		
Additional information we should know:		
CHILD NUMBER 4		
Name:	Age:	
Address:		
Birth date:	Grade in September:	Baptized: Yes No
Name and Address of Church Child was Baptized in:		
List Any Allergies:		
Additional information we should know:		

