



Child's Name									_	
	te form for ea	ch chil	d, pleas	se.)						
Parent's Name										
School child attends										
Age Date of Birth										
Grade as of 9/1/2018 (Circle One):	18 mos-2K	3yr	4yr	<b>K</b> 5	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	
Address									_	
Family e-mail										
Home/Cell Phone Alt. Emergency Phone Number										
Please list any allergies/medical co	onditions your	child n	nay hav	e that	we n	eed to	knov	w abo	ut: 	
I understand that the church offic church liable for any harm that m officials to take whatever steps ar agree	nay come to hi	m or ho eeking	er. I he medica	reby c al atte	onse	nt for	the c	hurch	)	
There is a \$25.00 fee for the first chil If you have more than two childre	-		•					•		
(parent's signature)			(date)							
registration fee paid			Please waive these fees.							
We will use	our signature	white	shirt thi	s year	•.					

Adult Sizes: Adult S Adult M Adult L Adult XL Adult 2XL

M(10-12)

L(14-16)

IF you don't have one, please circle your child's shirt size:

S(6-8)

**Child Sizes:**