



Wednesdays @ First Baptist Children's Choir & Missions Registration 2011-2012

Please provide a completed form for *each* child that will be involved in Children's Choir & Missions activities on Wednesdays at First Baptist.

Name _____

****E-mail address _____*****

**WE PLAN TO COMMUNICATE WITH YOU THIS YEAR VIA E-MAIL.
IF THIS PRESENTS A PROBLEM FOR YOU, PLEASE INDICATE HERE:**

_____ SORRY, E-MAIL IS NOT AN OPTION FOR US AT THIS TIME

Address _____ (street) _____ (city) _____ (zip)

Child's birthdate: _____ / _____ / _____ Age _____ T-shirt size: _____

School attending _____ Grade _____

Parents or Guardian _____

Phone numbers: _____ (home)

_____ (father's work) _____ (mother's work)

_____ (father's cell) _____ (mother's cell)

Allergies or other special needs: _____

Adult responsible for child on Wednesday evening: _____

Where will the responsible adult(s) be during Wednesday night activities if a need arises?

I grant permission for my child's photo to be used on the FBC website or in other FBC promotional materials.

Parent or Legal Guardian Date