



REGISTRATION FORM

(ONE PER CHILD)

Child's name:

Child's age:

Date of birth:

Last school grade completed:

Name of parent(s):

Street address:

City:

State:

ZIP:

Home telephone:

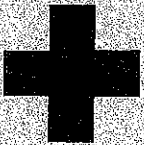
Parent/caregiver's cell phone:

Home email address:

Home church:

Crew number or name (for church use only):

Allergies or other medical conditions:



In case of emergency, contact:

Phone:

Relationship to child: