



# Registration Form

(One Per Child)

Child's name: Child's gender: Child's age: Date of birth: Last school grade completed:

Name of parent(s):

Street address:

City: State: ZIP: Home telephone: ( )

Parent/caregiver's cellphone: ( )

Home email address:

Home church:

Allergies, medical conditions, or special needs:

In case of emergency, contact:

Phone:

Relationship to child:

Crew number or name (for church use only):