

# Dalzell Baptist Church

## Contact Information & Registration Form

**Student Name(s):**

\_\_\_\_\_ **Grade:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Own a Bible (Y or N)** \_\_\_\_\_  
*(just completed)*

\_\_\_\_\_ **Grade:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Own a Bible (Y or N)** \_\_\_\_\_  
*(just completed)*

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*(just completed)*

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*(just completed)*

\_\_\_\_\_ **Grade:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Own a Bible (Y or N)** \_\_\_\_\_  
*(just completed)*

**Parent/Guardian Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Home Telephone:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_

**Medical or other information we need to know. (Please include any food allergies.) Use back of form, if necessary.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Emergency Contacts

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Home Church:** \_\_\_\_\_

**Individual(s) authorized to pick up child(ren) from club:**

\_\_\_\_\_

**Do you attend Sunday School? If so where?**

\_\_\_\_\_

**If you are visiting our church, who are you a guest of?**

\_\_\_\_\_

**May we have permission to photograph your child(ren)?** \_\_\_\_\_

**May we have permission to use your child's photograph for the purpose of promotion or on our church web site?** \_\_\_\_\_