

# WELCOME

**TO OUR TOWN**  
**WE WOULD LIKE TO GET TO KNOW YOU**

We are excited to announce we are updating our records as we look forward to using a new computer-based check in system!! To help us serve you, and to provide security for you and your children, please fill out the following information.

**DATE:**     /     / 2017     **THIS IS:**     ☐ A New Registration     ☐ Updated Information

## PARENT/GUARDIAN INFORMATION:

Father-	First:	Last:
Mother-	First:	Last:
Or Guardian-	First:	Last:
Others Authorized to Pick-Up Your Children:	1)	Relation:
	2)	Relation:

## CONTACT INFORMATION:

Address:	Apt. #:	City:
State: GA	Zip Code:	Home Phone: (     )
Father Cell Phone: (     )	Mother Cell Phone: (     )	
Father Email:	Mother Email:	

## CHILD #1:

Name- First:	Middle:	Last:
Birth date:     /     /	Age:	Grade:
		Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Allergies Or Special Instructions:		

## CHILD #2:

Name- First:	Middle:	Last:
Birth date:     /     /	Age:	Grade:
		Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Allergies Or Special Instructions:		

## CHILD #3:

Name- First:	Middle:	Last:
Birth date:     /     /	Age:	Grade:
		Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Allergies Or Special Instructions:		

## PERMISSIONS:

Occasionally, pictures are taken of our children for promotional purposes on our church website, facebook page, etc. May we include your child in these photos? Circle one and sign: Yes     No

We are in the process of updating our online directory. May we use the information you provided for this purpose? Circle one and sign:

Yes     No

