



# Federated Church

## General Registration Form (Minor)

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Parents' Name/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone" \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

Special  
Needs/Allergies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there a special friend your child would like to be with?: \_\_\_\_\_

\_\_\_\_\_  
**Class/Crew Assignment (completed by church)**

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

Where Individual Belief & Vibrant Faith Community Meet