

# CHILD REGISTRATION

## PARENT/GUARDIAN

FIRST NAME	LAST NAME	RELATIONSHIP TO CHILD	BIRTH DATE

## CHILD

FIRST NAME	LAST NAME	BIRTHDATE M/D/Y	M/F	AGE	GRADE

## ALLERGIES/SPECIAL INSTRUCTIONS

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## SIBLINGS

NAME	NAME	NAME	NAME

## CHILD ADDRESS

STREET	CITY	STATE	ZIP

<b>HOME PHONE</b>		<b>CELL PHONE</b>	
<b>DAD'S WORK PHONE</b>		<b>EMERGENCY</b>	
<b>MOM'S WORK PHONE</b>		<b>E-MAIL ADDRESS</b>	