

REGISTRATION FORM (please complete one per child)

ARTS SPLASH



CAMP

REGISTER NOW

July 9—13, 2017 5:15—8:00

Central Baptist Church, Marshall

Please Print Form and Return to CBC Office

REGISTER BY PHONE

For children who have completed Kindergarten, through Grade 6

903-935-9391

CHILD'S NAME _____ BIRTHDATE month _____ day _____ year _____

PARENT / GUARDIAN NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

EMAIL ADDRESS _____

PHONE NUMBERS: Main () _____ Mobile or other () _____

MY CHILD HAS COMPLETED WHICH GRADE: (circle) Kindergarten First Second Third Fourth Fifth Sixth

MEDICAL INFO OR OTHER INFORMATION WE NEED TO KNOW INCLUDING FOOD ALLERGIES: (use back of form)

EMERGENCY CONTACTS:

NAME _____ Phone number _____ Relationship _____

NAME _____ Phone number _____ Relationship _____

WHO is authorized to pick up your child each evening at 8:00 p.m. Following ARTSsplash? _____

Do you attend church? If so, where? _____

May we have permission to photograph your child in ARTSsplash? YES NO
May we use a photo of your child in remembrances, on our website or publicity? YES NO

PLEASE NOTE: YOUR PERSONAL INFORMATION WILL NOT BE SHARED

Make copies of this form if needed. Register today! Bring a friend, and remember that space is limited.

CENTRAL BAPTIST CHURCH

South Washington at Fannin St. Marshall, TX 75670 (903) 935-9391 office

email: dparks@cbcmarshall.org or Ideel@cbcmarshall.org