

Name: _____ Age: _____

Birth date: _____ Grade Completed: _____

Street Address: _____

Parent(s) Name(s): _____ Home Phone: (_____) _____

Emergency contact (name & phone #): _____

Allergies or other medical conditions: _____

Name of home church, if any: _____

Promotional Consent: The undersigned does also hereby give permission for any photos of our (my) child to be used in promotional materials and/or in the Hamburg Bible Church website (www.hamburgbiblechurch.org), understanding that no names or personal information will be used.

Signature of Parent or Legal Guardian:

Name: _____ Age: _____

Birth date: _____ Grade Completed: _____

Street Address: _____

Parent(s) Name(s): _____ Home Phone: (_____) _____

Emergency contact (name & phone #): _____

Allergies or other medical conditions: _____

Name of home church, if any: _____

Promotional Consent: The undersigned does also hereby give permission for any photos of our (my) child to be used in promotional materials and/or in the Hamburg Bible Church website (www.hamburgbiblechurch.org), understanding that no names or personal information will be used.

Signature of Parent or Legal Guardian:
