



# Registration

**Fall 2010/  
Spring 2011**

Child's Name \_\_\_\_\_ Sex \_\_\_\_\_

Age \_\_\_\_\_ Birthday \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Work Phone \_\_\_\_\_

Is your child potty trained? \_\_\_\_\_ or starting potty training? \_\_\_\_\_

Is your child walking? \_\_\_\_\_ talking? \_\_\_\_\_ able to eat by himself? \_\_\_\_\_

Church where your family is currently a member? \_\_\_\_\_

Registration fee: \$50 per family (non-refundable)

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Name (Print) \_\_\_\_\_

Registration form and registration fee due to ensure a spot for your child.  
*Make checks payable to Church of the Springs*