

Team Color: _____

Grace Bible Church

Registration/Permission Slip for Lil' Extreme 2010

Child's Name: _____

Age, Birth date: _____

Current Address: _____

How did you hear about this camp? (Circle one)

Flier, Part of the Church, From a Grace Church Member, Other: _____

Is this your child's first time attending Lil' Extreme? _____ Grace Bible? _____

Parent/Guardian Name/Number: _____

Emergency Contact Name(relation to child)/Number: _____

Other than parent/guardian who can pick up child? _____

Any Allergy/medications/ or health concerns we should be aware of: _____

If so, please explain: _____

Parents signature: _____

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[Grace Staff Only below]

_____ Payment Received

_____ Registration Information put on computer document

_____ Transportation needed

_____ Health we should be aware of

_____ This child has been put on "Leader's sheet"

Team Color: _____

If you would like transportation to be provided for your child; please fill out form on following page.

Transportation Form

Transportation can be provided within a 5 mile radius of the church. Would you like your child to be picked up/dropped off? If yes, please fill out the following. Please be ready to be picked up between 11:30-11:50; dropped off between 4:15-4:45pm.

Child (ren)'s Name(s): _____

Address: _____

Indicate with an X the days you would like us to provide transportation:

Monday:

Picked up: _____ Dropped off: _____

Tuesday:

Picked up: _____ Dropped off: _____

Wednesday:

Picked up: _____ Dropped off: _____

Thursday:

Picked up: _____ Dropped off: _____

Friday:

Picked up: _____ Dropped off: _____

Parent's Signature _____