

3 years - 5<sup>th</sup> Grade  
FPC Children's Ministry  
Church School Registration

Child's Full Name: \_\_\_\_\_  
Child likes to be called: \_\_\_\_\_ Gender: \_\_\_ M \_\_\_ F  
Child's Birth date: \_\_\_ / \_\_\_ / \_\_\_\_\_ Age Sept. 2003 \_\_\_ Grade Sept. 2003 \_\_\_  
Name of School: \_\_\_\_\_  
Child has been baptized: \_\_\_ Yes \_\_\_ No  
Mailing address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone/Pager: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone/Pager: \_\_\_\_\_

Parent(s) are Members of FPC (circle): Father Mother Both No

Child lives with:      Father              Mother              Both  
   Other: \_\_\_\_\_

Siblings?	Name _____	Gender: ___ M ___ F
	Name _____	Gender: ___ M ___ F
	Name _____	Gender: ___ M ___ F
	Name _____	Gender: ___ M ___ F

**Publicity Release:**

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For more information about this form or the requested information, please contact the Administration Office, Children's and Families Ministries by calling (903) 597-6317 ext. 308.