

For Office Use Only	Location:	Class:
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North Shore Fellowship King's Quest Registration Form
For Children Age 3 – 5th Grade
2010-2011

<p>Child 1 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one): M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>	<p>Child 2 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one) M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>	<p>Child 3 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one) M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>
<p>Child 4 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one) M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>	<p>Child 5 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one) M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>	<p>Child 6 Name:</p> <p>Birth Date:</p> <p>Age:</p> <p>Gender (circle one) M / F</p> <p>Grade Entering for 2010-2011 school year:</p> <p>Allergies or Special Needs:</p>

Please turn over and fill out the back of this form.

Please Check One:

- Regular Attendee
- First Time Visitor
- Returning Visitor

Parent(s) / Guardian(s): _____

Parent's location during the Sunday school hour: _____

Address:

_____ Street Address

_____ City State Zip

Home Phone: _____

Cell Phone: _____

Email: (PLEASE complete so we can quickly get info to you!)

Emergency Contact: _____

Phone Number: _____

Please mark an X by the location where your family will attend Worship and Sunday School.

- Woodland Ave. – North Shore Fellowship
- Mississippi Ave. –Northside Community Church

I _____ would like to help out with King's Quest:

- Teacher
- Shepherd
- Registration

Questions? Call Heather Dirkse at 994-5461, or email her at heather@northshore1.org.

Thank you!!!