

KID'S KLUB and CHOIRS Registration 2011-12

<i>Last</i> _____ <i>First</i> _____		Age _____	Birthdate / / _____	Grade in Fall 2011 _____
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Child's Name

Age

Birthdate

Grade in Fall 2011

Parents' Names _____

Address _____ City _____ Zip _____

Home phone _____ Mom cell _____ Dad cell _____

Email _____ PCOM Members? Yes ___ No ___

Does your child have allergies, medical conditions or anything else we should know about? Please specify.

In case of extreme emergency, if PCOM is unable to contact me, I authorize my child to receive emergency medical treatment from a health care professional.

Signature of parent/guardian

I will be attending:

Kid's Klub K^{*}-6th

**Must be 5 by Sept 2011*

Kid's Praise Choir K-6th

MV Youth Choir 4th gr. and up