



Cubbies - Preschool (Age 4)
The Orchard Evangelical Free Church
Registration for 2009-2010

OFFICE USE ONLY	
GROUP NO.	_____
GROUP LEADER	_____
EMER. CARD	_____
COMPUTER	_____

Child's Name (Last, First) _____ Birth date _____

Address (Street) _____ (City&Zip) _____

Home Phone _____ Gender (circle one) Boy Girl

Father's Last Name _____ Father's First Name _____

Mother's Last Name _____ Mother's First Name _____

Father's Cell Phone _____ Mother's Cell Phone _____

Home Church _____

Grade _____ School _____ Today's Date _____

Email is our communication tool *(updates & cancellations)* _____

Child's special needs or health concerns _____

Have you ever been in an Awana club (besides Cubbies) at another church? _____

If possible, I would like to be in a group with _____

Do we have permission to use photos and video of your child in publications? (circle one) Yes No



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