

NRG (5th – 6th) Registration Form

Child's Name: _____

Age: _____ School Grade: _____ Male / Female (circle one)

Birth date: _____

Parents' / Guardians' Names: _____

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Is child living with both parents / guardians? Yes _____ No _____

If "No" please list the other parent's/guardian's address and phone number:

Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

In case of emergency when either parent cannot be reached, contact: _____
phone: _____

Who will pick up your child? _____

Special concerns: allergies (food/medication), diets, behavioral, etc: _____

Are you willing to provide a snack for your child's youth group on a rotational schedule throughout the year? ____ Yes ____ No

If you would like to make a \$5 free-will donation to help cover some of our expenses, please check below:

_____ Check made out to Life Bridge Christian or LBCC (memo: "NRG")

_____ Cash

Date

Parent or Guardian Signature