

2 years & up

PARENT-

Please fill this out & return to Kid's Life.

Thank you!



Welcome!

Official Use

Date Received _____

Check in Initials _____

Assigned # _____

File Date _____

Please take a moment to fill out the following information about your Child and to read the Kid's Life Policy Sheet.

Child's Name _____ Age _____ DOB: _____

Parent/ Guardian Name(s) _____

Address _____

City _____ State _____ Zip _____ Phone# _____

Adults approved to Pick-Up _____

Allergies/Medical Information/Special Needs _____

I have read and understand the "Parents' Information Sheet"; and I've given consent for my child to be placed under the teaching and policy structure of Life Baptist Church.

Signature _____ Date _____