

Meadow Brook Baptist Church CLASS ASSIGNMENT _____
REGISTRATION FORM Mother's Day Out/Preschool

Date of birth _____ (check# _____) Today's Date _____
Sex _____ Age as of /Sept.1, 2014 _____
Child's Name _____

Address _____ (Last) _____ (First) _____ (Middle) _____

City _____ Zip _____ Home Phone _____

Which Parent has legal custody _____ Mom cell# _____ Dad cell# _____

Father's Name _____ Employer _____ Bus. Phone _____

Mother's Name _____ Employer _____ Bus. Phone _____

Number of brothers _____ Number of sisters _____ Church Affiliation _____

IN CASE OF EMERGENCY

Name of the nearest relative or neighbor to contact if parents cannot be reached:
Name _____ Phone _____ Relation to child _____

Name _____ Phone _____ Relation to child _____

Name _____ Phone _____ Relation to child _____

Email address _____