

KidsFIRST/M&M'S First Baptist Church Wednesday Bible & Missions Program Registration Form (please return to church)

Child's Name:

		/ /		
First Name	Last Name		Date of Birt	th Grade
Home Address:				
Street		City	State	Home Phone
Parent's Last Name		Parent's First Name		
Emergency Contact Na	те		Phone	
Allergies:				
Please list all children ir	n household (please print)			
Do you have a church h	iome? \	Where?		
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Our van space is <u>VERY</u> limited, but we do our best to provide transportation where needed. Please request <u>ONLY</u> if transportation is a <u>HARDSHIP</u> for you! Please call ahead at 361-275-3401 to reserve a space, if your child <u>NEEDS</u> to ride church van.

NEEDS to ride the church van? Yes No

I give my permission for my child to ride the First Baptist Church Van for the Wednesday Team KID/M&M's Program. I understand that my child must follow the rules of the church to stay in the program. I also, understand that an adult must be home when the van returns my child at 7 PM.