Welcome to FBC Kids Church!

Please take a moment to complete this form so that we may know your family better.

Parent Name(s)		
Email addresses		
Mailing Address		
Cell numbers		
Child's Name	□ M □ F Age [DoB Grade
Allergies? □ YES □ NO If yes, please list:		
Child's Name	□ M □ F Age [DoB Grade
Allergies? □ YES □ NO If yes, please list:		
Child's Name	□ M □ F Age [DoB Grade
Allergies? □ YES □ NO If yes, please list:		
Child's Name	□ M □ F Age [DoB Grade
Allergies? □ YES □ NO If yes, please list:		
Would you like to be added to our Children's Ministry	/ email list? □ YES	
I grant permission for pictures that include the childre published on:	en listed above without any pe	ersonal identifiers to be
 FBC webpage □ YES □ NO 		
 FBC social media □ YES □ NO 		
We will be inputting the above information into our se	ecured check-in system in ord	er to expedite your future

check-in. (Information is not publicly shared.) If you do not permit us to do so, please check here: □ NO

Anything you would like to share about your children to help us best support them?		
		
Signature of Parent/Guardian:	Date:	
	Dutc.	