



Registration Form

Child's Name: _____

Age: _____ Grade: _____ Birthdate: _____ Gender: _____

Special Needs/Allergies?: _____

Parent/Guardian: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Emergency Number: _____ Email: _____

Mother: _____ Father: _____

Would you be willing to help in choir for special events or when a teacher has to be absent? Yes: _____ No: _____

By signing below I am giving permission to have my child's photo or video taken August 2023 – May 2024 and used in publications and/or placed on First Baptist Church of Fair Oaks website.

Parent/Guardian Signature: _____

We're excited to sing with you!