



LEMENTARY

XPLORERS

Class Registration 2011-2012

Today's Date _____

Child's Name _____

Date of Birth _____

Parent(s)' Names _____

-or-

Grandparent(s)' Names _____

Address _____

Mobile Phone Number _____ Home Phone Number _____

Email Address _____

Siblings name and Date of Birth _____

Restrictions for my child's activities, special concerns or allergies:

_____ I do _____ I do not give permission for my child's picture to be used in church publicity.

OTHER: _____

We are: _____ First time visitors

_____ Regular visitors

_____ Members of CLCC

All CLCC teachers have completed a background.