

**Children's Registration      Thanking God on Wednesday**  
**One Registration per child**

Child's Name: \_\_\_\_\_  
Birth date: \_\_\_\_\_ Age as of Jan. 1, 2012 \_\_\_\_\_  
\_\_\_\_\_ **Nursery** (6 months – 3 yrs.)      \_\_\_\_\_ **Preschool** (3yrs – 5 yrs.)  
Parents/Guardians names \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Allergies/special needs: \_\_\_\_\_  
Emergency contact: Name: \_\_\_\_\_ Number \_\_\_\_\_

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