

FAMILY WORSHIP CENTER
King'z Kidz Children's Ministry
Kid's for Christ Children's Ministry

Child's Name _____ **Age** _____

Parent/Guardian _____

Relation to Child _____

Child's Address _____

Emergency contact number _____

Approved people to pick up your child _____

Allergies _____

In case we need to reach you about the health or behavior of your child, we ask that you please be close to your phone. Thank you for allowing us to teach your child the Word of God!