

Praise Team
Choir for Children Grades K-4



I am registering my child

Choir Member's Name _____

Grade _____ Birthday _____

(This fall indicate grades K, 1,2,3,4)

(Month/Day/Year)

Parent/Guardian

Name(s): _____

Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

Receives texts? Yes or No (Please Circle One)

Email _____

I/We would like to help Children's choir. Please select one or more:

___ Rehearsal Parent or ___ Robe Assistance.

- If your child cannot continue singing for any reason, please notify your director.
- I/We understand that rehearsals and participating in worship are important for the Children's Choir.
- I/We will do our best to attend and will notify the director well in advance if our singer cannot attend.
- I/We agree to allow my child's photograph to be used in church publications/publicity.

Parent/Guardian Signature

Return this form to Kim Henstock-Ewald

ksewald45@aol.com