



Grace on Hovey, June 21-24, 5:30-8pm
Children entering kindergarten through 6th grade

Parent(s)/Guardian Name(s): _____

Address: _____

Email: _____ Phone: _____

Church Home? _____

Child One Name: _____ Age: _____

Child One Grade Entering: _____ Allergies: _____

Child One Special Information: _____

Child Two Name: _____ Age: _____

Child Two Grade Entering: _____ Allergies: _____

Child Two Special Information: _____

Child Three Name: _____ Age: _____

Child Three Grade Entering: _____ Allergies: _____

Child Three Special Information: _____

Child Four Name: _____ Age: _____

Child Four Grade Entering: _____ Allergies: _____

Child Four Special Information: _____

Child Five Name: _____ Age: _____

Child Five Grade Entering: _____ Allergies: _____

Child Five Special Information: _____