Welcome, family!

Tell us about your household so we can help everyone feel at home.

Parent or guardian name(s)

Email

Phone

Children

NAME	AGE OR GRADE

Allergies or needs our children’s team should know about

Please contact us by

☐ Text ☐ Email ☐ Phone ☐ Please don’t contact us

We’d like to know more about

☐ Kids’ ministry ☐ Youth ministry ☐ Small groups ☐ Membership

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[Your church name] · [website] · [phone]