



2008 Super Saturday Registration

Please complete and sign the form below. Thank you.

Child _____ M / F Birthdate _____

Preschool: Age 4 Age 5 Grade Completed: K 1 2 3 4 5

Address _____

City _____ Zip _____ Home Phone _____

Parent/Guardian _____

Work Phone _____ Cell Phone _____

Home e-mail _____

In case of emergency, contact (include day phone #)

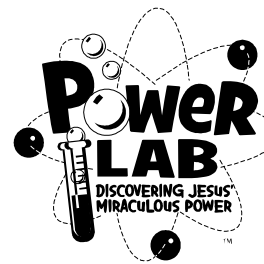
Known medical conditions, medications, allergies, etc.

Parental/Guardian Consent:

*I hereby give permission for the above named child to attend **POWER LAB Super Saturday**, the summer special event for children hosted by West Valley Missionary Church, on Saturday, June 28, 2008 from 9am-3pm. I also release West Valley Missionary Church from any liability or responsibility for injury or illness, and authorize the Super Saturday director or other ministry staff to seek necessary medical treatment for my child(ren) in the unlikely event of an accident/emergency.*

Signature _____

Date _____



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