

Easter Egg Hunt Online Registration Card

Parent's Name: _____

Address : _____

Contact Numbers: _____

Email Address: _____

- Child's Name: _____

Age: _____ Grade :(07-08) _____

- Child's Name: _____

Age: _____ Grade :(07-08) _____

- Child's Name: _____

Age: _____ Grade :(07-08) _____

- Child's Name: _____

Age: _____ Grade :(07-08) _____

Would you like any information on any of the following:
(If so please check all that apply)

Children Events	<input type="checkbox"/>	Youth Program	<input type="checkbox"/>
VBS	<input type="checkbox"/>	Church Services	<input type="checkbox"/>
Sunday School	<input type="checkbox"/>	Other: _____	
Wednesday Program	<input type="checkbox"/>		

How Did you hear about our Event: _____