

WEDNESDAY CONNECTION REGISTRATION

Name _____ Grade _____ Birth Date _____

Name _____ Grade _____ Birth Date _____

Options for: 2nd & 3rd Graders (circle 2) Worship Center Crafts Gym
In addition to Handbells 4th & 5th Graders (circle 1) Worship Center Crafts Gym

Phone contact number on Wednesday afternoon _____

Home phone (if different) _____ Cellular number _____

School _____ Food Allergies _____

Parent's name (s) _____

Address _____

I can help with: Snack _____ Robes _____ Class Assistant _____ Van _____