

Welcome to Kid Life Ministries!

The Garden (Birth thru Pre-K)

The Greenhouse (K-5th Grade)

Today's Date: _____

What service are you attending today?

Sunday: 9:00 AM 10:30 AM

Wednesday: 7:00 PM



Child's Name: _____ Gender: M F

Date of Birth: _____ Age: ____ Infant-Pre-K K-5th

Please list any health/developmental concerns and/or food allergies:

Child's Name: _____ Gender: M F

Date of Birth: _____ Age: ____ Infant-Pre-K K-5th

Please list any health/developmental concerns and/or food allergies:

Child's Name: _____ Gender: M F

Date of Birth: _____ Age: ____ Infant-Pre-K K-5th

Please list any health/developmental concerns and/or food allergies:

Guardian's Names: _____

Marital Status: Married Single

Relationship to child(ren): _____

Address: _____

City, State, Zip: _____

Home #: _____ Cell #: _____

Email address: _____

