

Little Women K-6th Grade 2011/2012

Name		Grade 2011/2012	
Birthdate (Month/Day/Year)	School	Registration Fee* <input type="checkbox"/> \$100 - covers dinner and all activities for the year. Please make checks payable to CRCC and include with registration form. If fee presents a financial hardship please contact Briana Dintino at briana.dintino@cedarrun.net	
T-shirt Size- (check one) - same shirts as last year <input type="checkbox"/> Child Small <input type="checkbox"/> Child Medium <input type="checkbox"/> Child Large <input type="checkbox"/> Child X-Large <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large		T-shirt Cost <input type="checkbox"/> \$15 Please include with registration form	
Home Address		City	State Zip Code
Email Address		Home Telephone Number	
Mom's Name		Dad's Name	
Mom's Cell Number		Dad's Cell Number	
Emergency Contact		Emergency Contact	
Family Physician's Name and telephone Number		Insurance Provider	
Any known FOOD allergies		Persons authorized to pick up your child other than parent	
Medical Information or Allergies			
<p><i>In the event of a medical emergency I authorize the person or persons in charge of leadership at Cedar Run Community Church to obtain medical assistance and treatment for my daughter in my behalf.</i></p>			
_____ Parent's Signature		_____ Date	
Is there anything you or your daughter would like us to know?			

***Please mail this to: The Ministry of Little Women
Cedar Run Community Church, 13560 McLearen Rd. Oak Hill, VA 20171***