

OAK GROVE BAPTIST CHURCH
Before & Aftercare School Program
REGISTRATION INTEREST FORM

Return form to Oak Grove BC (Mon-Thur) between 8am and 4pm

Please print legibly. One registration form per child (copy form as needed)
Non-Refundable Registration Fee: \$25.00 (if enrolled)

Child's Information

First Name _____ Middle _____

Last Name _____ Suffix _____

Date of Birth: (Month) _____ (Date) _____ (Year) _____

Gender: Male _____ Female _____ Age: _____

Disabilities: Yes _____ No _____ School: _____

Allergies: Yes _____ No _____ Type: _____

Parent's Information

Mother: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact #'s: _____ (H) _____ (W)

_____ (C) Email: _____

Father: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact #'s: _____ (H) _____ (W)

_____ (C) Email: _____

Are you interested in enrolling your child NOW? Yes _____ No _____
If not, what date? _____