



**Faith Imprints
Fall 2008 Registration**

**If your child is Birth-12 months old,
please use this form to register for a
Faith Imprints Fall 2008 group.
Groups will meet on the 1st and 3rd
Wednesday evenings of each month
from 6:15-7:15 pm beginning
October 1, 2008.**

Child's Name _____

Child's Birth date _____

Parent(s) _____

Address _____

Phone Number _____

E-Mail Address _____

Home Church _____

**Tuition for this Ministry is \$100 per
year. Scholarships are available as
needed.**

**Please find my check enclosed: _____
Scholarship is needed: _____**

**Older Siblings Participating Nursery
Information**

Child's Name:
_____ Nickname: _____

Birthdate: _____ Age: _____

Known food allergies or medical
concerns: _____

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