

ASBURY



TELL US ABOUT YOU...

 **Parent Name:** _____

Cell Phone: _____ Email: _____

Mailing Address: _____

Your Favorite Way to Hear from Us:

- Carrier Pigeon Email Instagram Facebook
 Text Message Phone Call Physical Mail Surprise Visit to your Front Door

The Best Part of Being a Parent Is.... _____

The Hardest Thing about Parenting is... _____

Our Church Could Help Me as a Parent By... _____

TELL US ABOUT YOUR KIDS...

 **Kid #1 Name:** _____

 **Kid #2 Name:** _____

Birthday: _____ Age: _____

Birthday: _____ Age: _____

School They Attend: _____

School They Attend: _____

Grade: _____

Grade: _____

Allergies: _____

Allergies: _____

People Allowed to Pick-Up my Child: _____

People Allowed to Pick-Up my Child: _____

People NOT Allowed to Pick-Up my Child: _____

People NOT Allowed to Pick-Up my Child: _____

Emergency Contact (Name, Relationship, Number): _____

Emergency Contact (Name, Relationship, Number): _____

Anything Else We Should Know? _____

Anything Else We Should Know? _____
