



**MORNING STAR**  
**LUTHERAN CHURCH**

CHILD'S NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

PARENT(S) NAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

MOBILE PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ALLERGIES? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

ANY SPECIAL NEEDS: YES NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_