October 7, 2023 Friendship Church 4640 Richmond-Foster Rd, Richmond, TX 77406

Registration Deadline: September

22, 2023

Name:



<u>District Office Use ONLY</u>					
Amt. Due	Amt. Paid				
Paid With					

Registration Fee: \$25.00 per Person-First Entry (\$5.00 for each additional entry)

Address:		City:				
State: Zip: _	Phone: (City: Phone: () Circle One: Male Female				
Parent/Guardian Na	ame:					
		Church City:				
		Church Phone: ()				
	•					
-	All Events in which yo					
Presentation Mini	istries (Can Choose	Up To Any Four Ei	itries)			
Music Division:						
Choir (7+ singers)	Vocal Solo	Vocal Ensemble (2-6 si	ngers)	Vocal Songwriting		
Christian Band	Instrumental Solo	Instrumental Ensemble	e Instrun	mental Arrangement		
***Instrument(s) to be	played:					
Accompanied by: (circle	e one) CD/MP3/piano/ke	eyboard				
Drama Division: (Indi	cate if black light will be	used)				
Drama Solo	_	Human Video	Solo	Human Video Group		
Sticks Solo			e Solo	•		
	ndicate if black light will	•				
	Puppetry Group	•	Sign Language	Group		
	Showcase Group					
Other (Please explain o	n back)					
Non Procentation Mi	inistries (Unlimited En	trios)				
	sion: (Must be delivered		the event)			
Short Story	Poetry	•		av Board		
Community Ministry Es	•			.,		
	Must be delivered by 9:3					
2-D Art	3-D Art Crafts	_	say	Science		
·	sign, Movie Making, Pow		t I have legal queted	y of the child who resides with me and I		
, the parent or legal guardia give my permission for my ch	ild to attend Kids in Ministry			y of the child who resides with the und i		
n consideration of my child b	peing allowed to participate in	n this event, I authorize the S	South Texas District	Council of the Assemblies of God to use		
	raphs or video in any and all o e of such photographs or vide		and all other media	a. I will make no monetary or other claim		
			hat they have no ille	gal or prohibited items. I will be held		
				rized personnel to obtain any medical		
				rents are not immediately available. I call. I further understand that I will be		
responsible for any medical e			J a p.i.yololaii oli			
Signature of Parent or Guardio	7n			ate (Required)		
ignacure of t urent or tidul and	ASI			un (meguneu)		