## **Membership Form**

Parent's Names			
Address			
City	Zip_		
Home Phone	Cell	Phone	
Email			
School Year			
Children's Names	M/F	DOB*(m/d/y)	Grade (as of Sept 1st)
Our family has thoroughly rea We agree to follow the Handb We also agree that First Nazar while our family participates	oook and the Polic rene Christian Cl	cies that are outlined. hurch is not responsible	s Handbook and Policies. e or liable for accidents or injuries
Parent Signature			Date