Faith Lutheran Church

☐ ***Enter New Family***
☐ ***Add Child to Existing Family***
☐ ***Change to Family Information***

Date _____

Father _____ ***Cell*** ( ) _____ ***Email*** _____
Last *First*

Mother _____ ***Cell*** ( ) _____ ***Email*** _____
Last *First*

Address _____ ***Phone*** ( ) _____
Street *City* *State* *Zip*

How did you find us? _____

Child's Name	*Birthday*	*Grade*	*Gender*	*Medical Concerns*	*cell / email*	*School*