



# 2018-19 LOGOS Registration Form

**OFFICE USE:**

Registration Completed:

Family Paid Fee:

Remind.com?

## Student Information

**First Child**

First name:

\_\_\_\_\_

Last name:

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Grade this school year: \_\_\_\_\_

Any allergies, specific illnesses or other information we should know about this child?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Second Child**

First name:

\_\_\_\_\_

Last name:

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Grade this school year: \_\_\_\_\_

Any allergies, specific illnesses or other information we should know about this child?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Third Child**

First name:

\_\_\_\_\_

Last name:

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Grade this school year: \_\_\_\_\_

Any allergies, specific illnesses or other information we should know about this child?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes. I authorize my child(dren) to be photographed at LOGOS.\*

*\*Photos are utilized in promoting the LOGOS ministry in printed publications and on our Bethel webpage and Facebook page.*

## Parent/Guardian Information

**Mother Name:**

\_\_\_\_\_

Phone: \_\_\_\_\_

Yes, use this number for text reminders: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_

E-mail address:

\_\_\_\_\_

**Father Name :**

\_\_\_\_\_

Phone: \_\_\_\_\_

Yes, use this number for text reminders: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_

E-mail address:

\_\_\_\_\_

Your family's church affiliation is: \_\_\_\_\_ Bethel Lutheran Church Other church: \_\_\_\_\_

How did you hear about LOGOS? \_\_\_\_\_

Mail or hand-deliver form and payment to: Bethel Lutheran Church 1009 18<sup>th</sup> Ave. SW Great Falls, MT 59404