



FREE SUMMER READING PROGRAM

Registration Form 2011

Sponsored by

Faith Presbyterian Church

12855 Old Hammond Highway, Baton Rouge, Louisiana 70816

Phone 225-275-7393 Fax 225-275-7399

www.faithpcbr.org

Pastor John G. Blewitt, D. Min

E-mail johnfpc@bellsouth.net

Student's Name _____ Entering Grade _____

School: _____

Please check (v) dates of attendance: 6/18___ 6/25___ 7/9___ 7/16___ 7/23___ 7/30___

Parent(s) _____

Address: _____

Telephone (Home) _____

(Work) Father _____ Mother _____

(Cell) Father _____ Mother _____

Emergency Name _____ Number _____

Persons authorized to pick child up (ID's will be checked)

Please List any known allergies or medical concerns

Medical Treatment Consent & Liability Release

I, the undersigned parent/guardian, do hereby grant permission for my son/daughter/ward to receive necessary first aid and/or medical treatment in the event of an injury or illness while attending the Free Summer Reading program sponsored by Faith Presbyterian Church, and I accept responsibility for the full payment for such medical treatment. I hereby hold Faith Presbyterian Church and their representatives harmless in the exercise of this authority.

Parent/Guardian Signature _____ Date _____

Please tell us how you learned about the Summer Reading Program _____

***** SPACE IS LIMITED SO ACT NOW!!!! *****

***Submit by fax to 225 275-7399 or by mail to Summer Reading, Faith Presbyterian Church, 12855 Old Hammond Highway, Baton Rouge, LA 70816 or e-mail to fkillen@gmail.com. Please reference "Summer Reading" in subject line of e-mail.