



**FREE SUMMER READING PROGRAM Registration Form- 2009**

Sponsored by  
Faith Presbyterian Church  
12855 Old Hammond Highway, Baton Rouge, Louisiana 70816  
Phone 225-275-7393 Fax 225-275-7399

[www.faithpcbr.org](http://www.faithpcbr.org)

Pastor John G. Blewitt, D. Min E-mail [johnfpc@bellsouth.net](mailto:johnfpc@bellsouth.net)

Student's Name \_\_\_\_\_ Entering Grade \_\_\_\_\_

School: \_\_\_\_\_

Please check (✓) dates of attendance: 6/20\_\_\_ 6/27\_\_\_ 7/11\_\_\_ 7/18\_\_\_ 7/25\_\_\_ 8/1\_\_\_

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)

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Please List any known allergies or medical concerns

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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](mailto:fkillen@gmail.com) . Please reference "Summer Reading" in subject line of e-mail.**