

# WINGS REGISTRATION

Grades 1-5

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Special health information (allergies, etc.) \_\_\_\_\_

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Special health information (allergies, etc.) \_\_\_\_\_

I would like to be in the same class as either \_\_\_\_\_ or \_\_\_\_\_

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Special health information (allergies, etc.) \_\_\_\_\_

I would like to be in the same class as either \_\_\_\_\_ or \_\_\_\_\_

Parents' name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home phone number: \_\_\_\_\_

Number where you can be reached during WINGS: \_\_\_\_\_

- I would be able to help walk the young children over to the church from the school on Wednesdays.
- I will be able to assist as a classroom leader or assistant
- I will be able to help at playground time
- I have paid \$15.00 per child Registration fee by check \_\_\_\_\_ cash \_\_\_\_\_



BEE sure to **pick up the Wings booklet** that explains our program and has the 2009-2010 calendar

**BEE SURE TO CALL GRACE LUTHERAN (283-4431),  
IF YOUR CHILD WILL NOT BE AT WINGS. Safety is our prime concern**