



Lenexa Baptist Church ♦ 15320 W 87th Street Parkway ♦ Lenexa KS 66219

Registration Form

2010-2011

Name: _____ Date: ___/___/___
 Address: _____ Phone: _____
 City: _____ State: _____ Zip: _____ Cell: _____
 Email address: _____ Birthday: ___/___/___

Children's Names (List all children)	Sex	Age	Birthdate	Attending Renew?
1. _____	M F	___	___/___/___	Y N
2. _____	M F	___	___/___/___	Y N
3. _____	M F	___	___/___/___	Y N
4. _____	M F	___	___/___/___	Y N

SPECIAL NEEDS: Do any of your children (participating in Renew for Kids) have special needs of which their teacher should be made aware? (Please write name of child and specific need.) _____

Do you regularly attend church? _____ If yes, where? _____

How did you find out about Renew for Moms? _____

If you wish, you may designate one person with whom you would like to be assigned a table. (Assignment is not guaranteed) _____

Registration form should be completed and returned with payment (\$45 per semester) to:

Sarah Hudnall
 20206 W 92nd Street
 Lenexa, KS 66220
 913.839.0252
 seh4ksu98@me.com

For office use only

Date rec'd _____
 Reg # _____
 Check # _____ amt _____
 Table _____