

The class your children attend is based on the age requirements of Wake County Schools (age as of

August 31st). All parents/guardians of children enrolled in HMPC Sunday morning programs must complete this form registering your children and giving them permission to participate in our program. Please complete **ONE** registration form **PER** child.

<u>Child's Name</u>	<u>Birth Date</u>	<u>Baptism Date</u>	Name of	School, Grade &	<u>Track</u>
Parent or Guardian					
Phone # Cell Phone # E-mail address					
Address					
Parent or Guardian				Phone # _	Cell
Phone # E-	-mail address				
What brings you to HMPC?	(Circle One) Me	ember First-tim	e Visitor	Regular Visitor	Special Event
If you are not a member, a	re you intereste	ed in membership?			
Does your child have aller			-		
Does the child carry the ap					
Does your child have any special needs? Please explain				(Use other side if necessary)	
Any other information abo					side if necessary)
HMPC does not use names of any photographs of your the Church Office and/or th	children, you must	t complete the Photog	graphy Proh	ibition Statement form	
Signature				Date	
		on Memorial Presbyter ix Forks Road, Raleigh			

Return Completed Forms to the Church Office.