

**Parent Information** 

## **FAST TRACK** to Legacy

Fast Track Check-In Request

- ✓ Family Self Check-In
- ✓ Partner with Kreek Kids Ministries
- ✓ Connect with AC3 Families

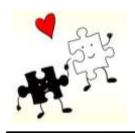
It is our goal to help families pass on a Faith Legacy to their children. **If you have attended AC3 six months or more and call AC3 home**, you are invited join us on the FAST TRACK to Legacy! Legacy is a place where parents and ministry volunteers partner together to create a SAFE weekend experience for families and other fun environments where faith development can grow and families can connect. We look forward to partnering with you on your family's spiritual journey here at AC3!

The purpose of this FAST TRACK request form is to enroll active AC3 families into the FAST TRACK Check-In system! This system is designed to FAST TRACK families through the Kreek Kids Check-In system more efficiently. After enrolling, FAST TRACK families will be contacted, given simplified self check-in procedures and issued a family FAST TRACK ID number with matching key tags. We look forward to partnering with you as we strive toward making your weekend experience at AC3 more enjoyable and SAFE for visiting families.

If you are newer to AC3, find out more about Kreek Kids, a co-op ministry, and how to get on the FAST TRACK to Legacy @ www.ac3.org. Just follow the Kids link to FAQ & Downloads.

Parent Information	Date				
Parent/Guardian(s)					
First and Last Names in Ho	usehold				
ddress					
Street Address			City	Zip Code	
Cell Phone #1		#2			
Put cell phone #'s in priority; 1 then 2. Paren		be used to s	end a TEXT PAGE to during we	ekend services if needed.	
Cell Service Carrier Primary Email Ac					
econdary Emergency Contact Person	Relationship	Phone Number			
Child Information					
ema mormation					
Child's First and Last Name:	Birthday	Age or Grade	Allergy, medical, family ale	erts or special needs?	
Crima 3 First and East Name.	Dirtiday	Grade	Allergy, medical, farmly are	or special fields:	

Confidential



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## **Kreek Kids Co-op Information**

Families participating in the FAST TRACK Check-In syste	tem are asked to:		
1. Complete an AC3 Family Registration Card. ☐ Done ☐ N	Not yet, please contact me.		
2. Attend AC3 six months or longer and call AC3 home.	Yes Do (If no, how long have you attended?)		
3. Play a supporting role* in the Kreek Kids Co-op ☐ Yes ☐	☐ Not yet, please contact me.		
Where? ☐ Behind-the-Scenes Support ☐ Nursery/Toddl ☐ Substitute Helper ☐ Other	dler Area		
Your signature below, gives AC3 permission to do a background	nd check for AC3 parents helping in Kreek Kids, free of charge		
Print 1st parent or volunteer name (Include middle name)	Print 2 <sup>nd</sup> parent or volunteer name (Include middle name)		
Print maiden name if applicable and all aliases	Print maiden name if applicable and all aliases		
Birthdate Signature Date	Birthdate Signature Date		

Turn in your FAST TRACK Request Form at the Kreek Kids Check-In Center or put in Twila's mailbox in the AC3 office area. Family ID Key Tag Example (not to scale)



Additional Kreek Kids and *FAST TRACK to Legacy* forms can be downloaded @ <u>www.ac3.org</u>. Follow the Kids link to FAQ & Downloads.

Contact Twila Crain with your additional questions about Kreek Kids and Family Ministries @ twila@ac3.org or 360-659-7335 ext. 202

OFFICE USE ONLY -

Assigned Family/Key Tag Number(s):

Date assigned: