

Please complete both sides of this form.



Jr. High Ski Trip
January 5, 2013

**Jr. High Ski Trip
January 5, 2013
REGISTRATION FORM
Cost: \$60.00**

STUDENT NAME: _____ **GRADE:** _____

BIRTHDATE: _____ **STUDENT PHONE/CELL NUMBER: (_____)** _____

PAYMENT:

Amount Enclosed: \$ _____

Check No.#: _____ (Payable to Centenary UMC, Student Name & Event in Memo Line)

Cash (Circle if Applicable)

EMERGENCY CONTACT INFORMATION:

Parent(s)/Guardian(s) Name: _____

Student's Home Phone: (_____) _____

Cell (Mother) (_____) _____

Cell (Father) (_____) _____

Address: _____

City _____ **State** _____ **Zip** _____

For Office Use Only: Initial next to following when received.

_____ Registration Form (Double-sided)

_____ Payment

_____ Copy of Health Insurance Card (Front/Back)

_____ Perfect North Waiver