



REGISTRATION FORM

Name(s) and age(s): Please print clearly

		•
Street Address:		
City:	State:	Zip:
Phone: Cell phone:_		(include area code)
Email Address:		
Number of family members participating in Athens V	BS:	(how many will attend?).
♣In case of emergency, contact:		Phone:
Allergies or other medical conditions:		
Home church:		
Please RETURN complet <u>DEADLINE July</u>		•
For church use only (Oikos tribe name):		 -

Rev. Cedric Mitchell, VBS/FEW Director

David Chapel Baptist Church / 2211 E. Martin Luther King Jr. Blvd. / Austin, TX / (512) 472-9748

Pastor Joseph C. Parker, Jr., Esq., D. Min.

Participant form