

**Ages
Pre-School
-
5th Grade**



**Time:
5PM-8PM**

Registration Form

Presbyterian Church
12 South Prince Street
Shippensburg, PA 17257

Or E-mail Form to
office@presbyship.org

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Child's Name: _____ Age: _____

Parent's Name: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Home Telephone: (____) _____ Cell: (____) _____

Home e-mail address: _____

Emergency, Contact: _____ Phone: (____) _____

Allergies or other medical condition and any diet restrictions: _____
