



2011- 2012 FAMILY ENROLLMENT FORM

Please fill out this form completely and email it to dlocke@millingtonbaptist.org or submit a printed copy to the church office as soon as possible. The information you provide equips us to better serve your child and communicate with your family. We are committed to ensuring the privacy of your information.

Enroll Guest

How did you hear about Cornerstone? _____

**Please include child's last name if different than parent/guardian.*

CHILD 1

Name _____

Male

Female

Birthday (mm/dd/yr) _____

Grade in 2011-2012 _____

Known Allergies/Health Concerns:

One word to describe my child is:

CHILD 2

Name _____

Male

Female

Birthday (mm/dd/yr) _____

Grade in 2011-2012 _____

Known Allergies/Health Concerns:

One word to describe my child is:

CHILD 3

Name _____

Male

Female

Birthday (mm/dd/yr) _____

Grade in 2011-2012 _____

Known Allergies/Health Concerns:

One word to describe my child is:

Full Name(s) of Parent(s) or Guardian(s) _____

Address _____ City _____ Zip _____

Home Phone _____ Mobile _____ Other _____

Preferred Email _____ Home Church, if applicable _____

Name(s) and home/cell numbers of adults who are authorized to pick up your child in your absence. _____



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We believe that God created each child with unique skills and personalities. So we've put together a few questions to equip your child's teacher and leaders with the key information they need to help your child thrive at Cornerstone. Our team is looking forward to getting to know your child better this year!

Learning Style: In your experience, what are some of the best ways to facilitate your child(ren)'s learning process? Please share any special needs or helpful tips that work best to help your child grasp new concepts and material.

Is there anything else our team should know to better facilitate a positive experience for your child?

REQUIRED:

From time to time we use photos and videos from Cornerstone in our print and web-based communication materials. We will not identify your child by name in these photos. Please check one of the boxes below to indicate your permission for us to use your child(ren)'s photo.

Yes, I give my permission

No, I do not give my permission