

Registration Form

Parent/Guardian Name(s):

Address: _____

City: _____ Zip Code: _____

Preferred Phone: _____

Email Address: _____

Emergency Contact Name & Phone #:

Child 1: _____

Youth Music Opportunity

___ Music Explorers ___ Cherub Choir ___ Choristers

___ Youth Choir | Voice Part (if known):

Soprano Alto Tenor Bass

___ Youth Band (Audition Sign Up)

List any food allergies, special needs, or accommodations necessary for your child:

Child 2: _____

Youth Music Opportunity

___ Music Explorers ___ Cherub Choir ___ Choristers

___ Youth Choir | Voice Part (if known):

Soprano Alto Tenor Bass

___ Youth Band (Audition Sign Up)

List any food allergies, special needs, or accommodations necessary for your child:

Photo and Video Release

By completing this form, I authorize Easter Lutheran to publish any photos and videos taken of my children listed on this form, for use in Easter Lutheran's communications.