

TITUS 2

2011/2012 REGISTRATION FORM

Please print as you complete this form and return to the church office by Tuesday, August 30, 2011



NAME: _____

Address: _____

City: _____ Zip _____

E-mail Address: _____

Cell Phone: _____

Home Phone: _____

Age: _____ Marital Status: Single _____ Married _____

Husband's name: _____

Child's name(s)/age(s): _____



Please indicate the days you are available to meet. If more than one is possible, please rank your preference; 1st, 2nd, etc. Availability is key to determining which group you are placed in.

Sunday PM _____ Monday AM _____

Tuesday PM _____

Cost: \$15.00 Cash _____ Check # _____

Material received: Yes _____ No _____