

EPWORTH UNITED METHODIST CHURCH CENTERSHOT ARCHERY PROGRAM

REGISTRATION FORM

Spring Class

Tuesday, April 14th, 21st & 28th & May 5th, 2020

5:30 P.M. TO 8:30 P. M.

You are requested to make a donation of non-perishable food or a cash donation to the Epworth Food pantry when you sign in each evening. Thank you.

PARTICIPANT must be at least 8 years old.

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Gender: Male _____ Female: _____ Date of Birth: _____ Age: _____

PARTICIPANT CONTACT INFORMATION:

Parent/Guardian Name: _____

Parent E-Mail Address: _____

Daytime Phone: _____ Night Time Phone: _____

Group: (Boy Scouts, Church or Community) _____

MEDICAL INFORMATION:

Any medical condition that we should be aware of? _____

Any food allergies? _____

Emergency Contact Information: _____

In the event of a medical or dental emergency and you cannot reach me, I give my permission for you to seek medical attention for my child. **(signature)** _____

Please initial this box affirming that you and your child will, at all times, participate in the activities of the CenterShot program in a respectful manner.

CenterShot may be filmed or photographed for public view in Epworth's print & web publications.

*You will be assigned to a team and will be notified by the phone number you provided of the time you need to arrive. You may expect this call on April 12th between 2 – 7 pm. If no answer a message will be left on your answering machine. If you miss this call phone 304 440-0089.

This program includes a devotional time, if you have questions call the Church Office @ 304-372-3493.

Registration is limited to 55 participants. Registrations are accepted in the order in which they are returned to the church office.