Journey Fellowship Baptist Church



Child's Name:	Gender: male / female
Birthdate: Age:	
Current Grade Level:	
Parent's Name:	
Address:	Phone:
Parent Email:	_
Does this child have any allergies, medical concerns, learning/behavior, or special needs that we should be aware of? (All comments will be strictly confidential)	
Complete If Applicable	
Is Child interested in a Solo: YES or NO	Cast Member part: YES or NO

Instrument(s) played:______ How many years?_____

Children's Choir Rules and Guidelines

Please be punctual for practice on Wednesday nights from 5:45pm - 6:25pm. If your child cannot attend children's choir practice, please inform Lauren Yates (770-871-8358 or email <u>laurenyates121413@yahoo.com</u>) in advance. Choir member MUST attend at least two practices before he or she can present on stage prior to a Sunday service performance. Choir members must also be able to sit for the duration of practice time.