



REGISTRATION FORM

Name:

Address:

Phone :

Cell:

Email:

Special Requests:

Special Needs Child Yes No

Recent Loss of Family Member Yes No

Other:

Cost: \$100 per year (includes childcare & curriculum)

For Childcare Purposes:

Child's Name:

Age:

Birthdate:

Allergies:

Feeding Schedule:

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Age:

Birthdate:

Allergies:

Feeding Schedule:

In an effort to nurture our moms, it is necessary that infants and children will not be allowed in with their parents during the large group/small group times.

Space is limited, so register early!



**2203 Lakeway Blvd. • Lakeway, TX 78734
512-261-6331 • www.lakewaychurch.org**



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