## Briarwood Presbyterian Church



## Mother's Day Out

2200 Briarwood Way ~ Birmingham, Alabama 35243

## Registration Form Fall 2021

OFFICE USE ONLY Non-refundable				
Paid: Yes Amt				
Check #				
Date Received				
Teachers				
SiblingAge				

Full Name of child		first name	Birthday//
Nam	e child goes by		Sex
Mother's NameAddress/City/St		Father's Name	
			zip code
Email Address:			
Home phone	work/cell – m	nother's	father's
	baby chicks/bear cubs - 1's	One Day:	Wednesday
		Two Days:	MondayThursday
✓ each day	hat you are requesting*		TuesdayFriday
Please fill out the form with an ultra fine Sharpie like black pen.	the colts/tiger cubs - 2's/3's	One Day:	Wednesday
		Two Days:	MondayThursday
	the eagles/the lions - 3's		TuesdayFriday
		One Day:	Wednesday
		Two Days:	MondayThursday
Thanks!			TuesdayFriday
	*any con	nbination or number of	days
How d	id you hear about our Mother's Day ( d of mouthbulletina friend _	Out Program?WDJC _website – briarwood.org/	WLJRFacebook publication ad mdo
Briarwood Church	h Member? []Yes []No If no	t, where	
	child may be released:		
	Name of persons author	rized to act for parent in	case of emergency:
1. Name and address			ph#
2. Name and address			ph#
Name of child's physician			ph#
Does your child h	ave allergies? If so, what?		
In space below, gi	ve any other information the teach	er should know about ye	our child: physical condition, habits, likes and
dislikes, etc			
If sibling is in the	program at this time: sibling's nam	e	age
Signature			Date