



PreK MOMS AM Membership Registration Form

Welcome! Please print clearly!

TODAY'S DATE: \_\_\_/\_\_\_/\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email: \_\_\_\_\_ Birthday: \_\_\_/\_\_\_/\_\_\_

Husband's Name (if applicable): \_\_\_\_\_

Home church (if applicable): \_\_\_\_\_

YOUR CHILDREN: Please provide info for each of your children.

Childcare (check box if child will be in our Childcare program during PreK Moms)

Circle

- Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_
Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_
Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_
Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_
Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_
Name: \_\_\_\_\_ M F Date of Birth: \_\_\_/\_\_\_/\_\_\_

Membership Fee Total - Spring Discount (through May 31) .....\$25.00

Membership Fee Total (after May 31) ..... \$30.00

Make Checks Payable to Immanuel Bible Church

5433 N Center Rd Saginaw MI 48604

immanuelbiblechurchsaginaw.org/ministries/womens-ministries/prek-moms/

Email: prekmoms@ibcsaginaw.org

Table with 2 rows: For Leadership Team Use Only, Date registration received; Database Entry: