

VOICE OF  
**PRAISE**  
F B C L E W I S V I L L E

Birthdate: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_ Gender: M / F

Student Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Student Cell Phone: \_\_\_\_\_

Student Email: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Dad's Name: \_\_\_\_\_  
(first & last)

Dad's Cell Phone: \_\_\_\_\_

Where does he attend church? \_\_\_\_\_

Mom's Name: \_\_\_\_\_  
(first & last)

Mom's Cell Phone: \_\_\_\_\_

Where does she attend church? \_\_\_\_\_

Do you sing in your school choir? \_\_\_\_\_

Do you play an instrument? What? \_\_\_\_\_

Do you like singing solos?    Yes            No            Maybe

Do you like to act?            Yes            No            Maybe

Do you like to dance?        Yes            No            Maybe

List any food allergies: \_\_\_\_\_

What is your favorite soft drink? \_\_\_\_\_

What is your favorite fast food place? \_\_\_\_\_

Who is your favorite band or solo act? \_\_\_\_\_

What is your favorite TV show? \_\_\_\_\_

List your best friends at church: \_\_\_\_\_

Enroll Me

Just Visiting

8  
1  
0  
2  
-  
7  
1  
0  
2