



Child's Name \_\_\_\_\_

Parent's/Guardian's Name \_\_\_\_\_

Church You Attend \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Last grade completed \_\_\_\_\_

T-shirt Size: Small (6-8) \_\_\_\_\_ Large (14-16) \_\_\_\_\_

Medium (10-12) \_\_\_\_\_

Mail this registration form, a Medical Release Form (included in newsletter packets and mailed to church Music Ministers), and the appropriate fee to:

Strawberry Baptist Association  
P.O. Box 91  
Bedford, VA 24523

Each child will sing in the choir  
and participate in 2  
**Music Activities**

(Indicate 1st, 2nd, & 3rd choices)

\_\_\_\_\_ Handbells

\_\_\_\_\_ Crafts

\_\_\_\_\_ Puppets

\_\_\_\_\_ Orff Instruments

\_\_\_\_\_ Signing