

PTDN 2018

PRETEEN DISCIPLE NOW 2018
Preteens 3rd - 6th Grades
February 2-4, 2018

First Baptist Church
306 South 10th Street
Pflugerville, Texas 78660
(512) 251-3052

PLEASE COMPLETE THIS SECTION

\$60 Super Early Registration – Sunday, November 19, ONLY
\$70 Early Bird Registration – November 20 – December 3
\$80 Regular Registration – December 4, 2016 – January 14
\$90 Late Registration – January 15 – January 28
\$100 Extra Late Registration – January 29 – February 2

\$30 (nonrefundable) Deposit – Balance Due January 14

Payment Amount: \$ _____ Date Paid _____

Method of Payment: Check # _____ Cash ___ Other _____

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Method of Payment: Check # _____ Cash ___ Other _____

➔ T-Shirt Size: (circle one) Youth - S, M, L, Adult - S, M, L, XL, 2XL, 3XL

Preteen's Name _____

Gender: Male Female Birthdate: __/__/__ Age: ____ Grade: 3rd 4th 5th 6th

Address _____
Street City State Zip

Parent/Guardian Information:

Name _____ Name _____

Home _____ Home _____

Cell _____ Cell _____

Email _____ Email _____

Other Persons to Contact In Case of Emergency _____

Address _____ Phone _____

Relationship _____ Phone _____

Home Church _____

Attending With a Friend? ____yes ____no Friend's Name _____

Medical Insurance _____ Policy Number(s) _____

Subscriber/Member Name _____ Customer Service Phone _____

➔ **(Please attach a copy of *Insurance Card* to this form – front and back please)**

Primary Care Physician _____ Phone _____

Any Ongoing Health Problems? _____

Please list all medications you are currently taking, dosages, and times for each dose:

Medication(s) Dosage Time for each dose

Will Medication Need to Be Administered at PTDN? (circle one) Yes No

➔ **(If so, complete and attach *Medications to Be Administered* form)**

List any allergies (food, seasonal, animal, etc) _____

RELEASE/PERMISSION CLAUSE: I (we), the undersigned parent(s)/legal guardian(s) of the above applicant do hereby release and discharge the FIRST BAPTIST CHURCH OF PFLUGERVILLE, TEXAS and it's representatives and staff from all liability of any kind, upon any claim or course of action which might be asserted in behalf of said minor against said church, representative or staff. Furthermore, in the event of an accident, if staff is unable to contact a parent or guardian, I (we) hereby grant permission to said staff to administer necessary first-aid and/or to take applicant to the nearest hospital or medical facility for additional treatment. I also agree to allow my student to ride in transportation provided by FBC Pflugerville to/from their host home and other planned Preteen Disciple Now activities.

Parent (Guardian) Signature _____ Date _____

____ ***Please check if you would like to be contacted with information about being a host home.***