

Angel Choir Registration 2016-2017

Name of chorister	
Birth date	
Grade in school (if applicable)	
Any food allergies, learning challenges, and/or anything else that we and faith formation leaders should be aware of?	
Musical experience (None is needed, but we'd like to know if your child has any.)	

Parent/Guardian name(s)	
Address	
Phone number	
Parent email address	
How I can be contacted during worship if needed.	
I could accompany the children on the following instrument(s)...	

Questions? Contact Stephanie at 425/576-1762 or stephanie@lwumc.com.