



LOST AT SEA

REGISTRATION FORM - JUNE 26-30 - 5:30-8:00PM



Name _____

Birthdate _____

Street address _____

City _____ State _____ Zip _____

Home phone (_____) _____ Cell phone (_____) _____

E-mail _____

Parent(s) name(s) _____

Parent(s) work phone(s) _____

In case of emergency, contact _____

Allergies or other medical conditions _____

School grade just completed _____ Name of home church, if any _____

St. Jude's Episcopal Church

815 E Graves Ave, Orange City, FL 32763

(386) 775-6200

stjudeschurch@embarqmail.com

www.stjudescentralflorida.org