



OLYMPIAN CLUB
Mountain View Baptist Church

PLEASE PRINT CLEARLY!

Year

Child's Last Name Child's First Name

Age Gender Date of Birth: (M) (D) Year

Mother's Name Father's Name

School attending Grade (entering in fall)

Home Address

Mailing Address

Contact Person

Home Phone # Work Phone # Cell Phone #

Email(s)

People authorized to pick-up child

Name Name

Name Name

PARENTAL OR GUARDIAN PERMISSION
I grant permission for my child to leave church property for official club outings only.
A Signed Liability Release Form is attached.

Parent/Guardian Signature

Date Signed: (M) (D) Year

OLYMPIAN CLUB OFFICIALS ONLY

Challenger 1st-2nd Grade **Conqueror 3rd-4th Grade** **Champion 5th-6th Grade**

Book Payments Received _____ Paid in Full
Date _____