

CHILDCARE RESERVATION FORM

Life Group:					
Group Coordinator:					
Coordinator's email:					
Coordinator's phone #:					
Friday Night Childcare:					
[Event Location] :					
[Reservation Deadline]					
[Event times](Friday Night Childcare: 6:30 - 9:45 p.m.)					
Child's Name	Birthdate (mm/yy)	Grade (K 5th)	Parent's Email	\$8 each (\$24 max)	Forms Up to Date? (Y/N)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					

Please remember:

1. Reservations are confirmed with prepayment only. Please submit completed forms and money to the Childcare office (KB142) in the Envelope by the event deadline.
2. Receipt of reservation list will be confirmed via email at least 3 days prior to the event.
3. Emergency Contact Number - Childcare Office (281) 885-6723
4. **Cancellations - no credits or money refunded.**

And all your children will be taught of the Lord, and great will be the peace of your children. Isaiah 54:13