

Youth Handbell/Chime Choir Registration Form
(2009/2010)

Ringer's Name: _____ Birthday: __ / __ / __

Address: _____ City: _____ Zip: _____

Home Phone #: _____ 2nd Phone #: _____

Parents' Names: _____

Email Address(es): _____

Emergency Contact: _____ Phone: _____

School Name: _____

Current Grade: _____

ROC Only: Preferred Practice Day/Time: Please number preferences from 1 (most convenient) to 7 (least convenient). Put an X if you are not available:

- _____ Sunday before church
- _____ Sunday after Joyful Chimers
- _____ Sunday evening
- _____ Monday evening
- _____ Tuesday evening
- _____ Wednesday evening
- _____ Thursday evening

For evening practices, what is the *earliest* time you can practice?

Monday _____ Tuesday _____ Wednesday _____ Thursday _____

Can you only participate during certain months/seasons? Provide any other important info here (such as specific time periods you aren't available on certain nights):

Please feel free to contact me (Laura) at 485-5941 or at laurabowman@embarqmail.com if you have any questions!