



Orthodox Christian

Searching our way thru the Bible

Summer Olympics



AUGUST 29 – 31, 2005 REGISTRATION FORM

Name or child _____ Grade level _____
(last school grade completed)

Address _____ Birthdate _____

Home Phone _____ Age _____

Parent's Name _____ Work/Cell Phone _____

Home Church (if other than Assumption) _____

Allergies or other medical problems _____

In case of emergency, contact _____
Name Phone

In the event of a medical emergency, if I cannot be reached, I grant my permission to the staff of Assumption Greek Orthodox Summer Christian Olympics to procure appropriate medical care for _____

Child's Name

Parent's Signature

Medical Insurance Company _____

Medical Insurance Number _____

Policyholder's Name _____

Assumption of the Blessed Virgin Mary Greek Orthodox Church
5761 East Colorado Street, Long Beach, California
562-4948929