



MOMS & TOTS
...get connected

Moms & Tots Registration Form

Last Name First Name Birthday (month / day)

Address

Home Phone # e-mail

Husband's Name Anniversary

Do you attend a Church? ____yes ____no If yes, where? _____

Children: Names and Ages

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

Why are you interested in the Moms & Tots ministry? (check all that apply)

Meet new friends _____ Break from kids _____ Adult conversation _____

Learn Biblical methods to deal with challenges, kids, husband, etc _____

Other (write in) _____

Please sign below and circle the items (name, address, phone #, e-mail) you agree to have shared in the Moms & Tots directory
