



Students Name - _____ (one per student)

Grade- ____ Age- ____ T-shirt Size (circle one) S M L XL 2XL (adult)

Please indicate if youth size is needed. Limited availability

Student's cell phone- _____

Student's email address- _____

Parents Name - _____

Parent's mobile number - _____

Parent's email - _____

Emergency Contact - _____

Special needs? List any food allergies or medications below:

Cost: \$60. Cash or checks made payable to:

Fayette Baptist Church

12465 Hwy 64

Somerville, TN. 38068

Please return this page along with payment on or before September 1, 2017

Forms and payment may be dropped off at the Welcome Center in the church lobby, mailed to the church office, or placed in the drop box in the Youth Room.

If you have any questions, please contact:

Jon Gambrell. jon@fayettebaptist.com. 901-331-7584