

**CHERUB CHOIR SINGER REGISTRATION (2018-2019) AND BIOGRAPHY**

**Please include email address, as I will be contacting parents and children throughout the year using this means of communication. Thank you!**

Singer's Full Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Birthdate \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Emergency contact name and number: \_\_\_\_\_

Brothers and Sisters (names and ages)

\_\_\_\_\_  
\_\_\_\_\_

Pet(s) and names \_\_\_\_\_

**SINGER'S FAVORITES**

Candy Bar \_\_\_\_\_ Sport \_\_\_\_\_

Color \_\_\_\_\_ Restaurant \_\_\_\_\_

Food \_\_\_\_\_ Toy \_\_\_\_\_

If you asked my best friend to describe me in three words, he/she would tell you I am....

\_\_\_\_\_

When I grow up I would like to \_\_\_\_\_

**TO PARENTS: ARE YOU SAFE SANCTUARY TRAINED?** YES \_\_\_\_\_ NO \_\_\_\_\_  
**WOULD YOU LIKE TO BE A CHOIR PARENT?** YES \_\_\_\_\_ NO \_\_\_\_\_  
**WOULD YOU BE WILLING TO HELP WITH NEEDS DURING THE YEAR?** YES \_\_\_\_\_ NO \_\_\_\_\_

**Please return registration form and pictures as soon as possible so singers can be spotlighted on our Bulletin Board in our rehearsal room.**

**PLEASE INCLUDE ONE CANDID PHOTO OF YOUR CHILD, PUT THE SINGER'S NAME ON THE BACK OF THE PHOTO.**

This information/pictures are used to prepare biographical sketches of the children during the choir year.

**YOU MAY RETURN THE REGISTRATION FORM AND PICTURE  
to the Church Office, Att: Patti Wootten;  
scan and send via email to [awootpmgt4265@aol.com](mailto:awootpmgt4265@aol.com)  
or snail mail to Patti Wootten, 1661 Mason Knoll Rd, St. Louis, MO 63131-1220.**