

Sunday Morning Transfer Slip
Kids' Worship (Grades 1 - 3)



9:30 AM

Child's Name: _____

Child's Grade (circle one): 1st 2nd 3rd

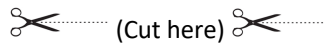
Parent's Name: _____

Parent's Phone #: _____

I will pick up my child in the Children's Lobby near KIDZ Central as soon as he/she is done singing.

OR

Please transfer my child to Bible Fellowship. Room Number: _____



Sunday Morning Transfer Slip
Kids' Worship (Grades 1 - 3)



11:00 AM

Child's Name: _____

Child's Grade (circle one): 1st 2nd 3rd

Parent's Name: _____

Parent's Phone #: _____

I will pick up my child in the Children's Lobby near KIDZ Central as soon as he/she is done singing.

OR

Please transfer my child to Bible Fellowship. Room Number: _____