



VISITING FAMILY

Date ___/___/___

Parent/Carer's Names _____

MOBILE _____

Address _____ State _____ Postcode _____

1) Child's Full Name _____ Age Group _____

 MALE FEMALE Allergies _____

2) Child's Full Name _____ Age Group _____

 MALE FEMALE Allergies _____

3) Child's Full Name _____ Age Group _____

 MALE FEMALE Allergies _____

TEMPORARY NUMBER _____

This number will be placed up on the screens in the auditorium, if you child is upset or requires a nappy change. If you see your family number, please come and check on your child.

We are visiting Hillsong Kids today: <input type="checkbox"/> from another church <input type="checkbox"/> from overseas <input type="checkbox"/> for the first time <input type="checkbox"/> we visit regularly	Service Attended: <input type="checkbox"/> Sisterhood <input type="checkbox"/> Sat 6pm <input type="checkbox"/> Sun 8am <input type="checkbox"/> Sun 9:30am	<input type="checkbox"/> Sun 10am (Bondi)	AGE GROUPS 1 & 2yr olds = CH 3-5yr olds = ARK K - Grade 1 = FH Grade 2 - 3 = AS Grade 5 & 6 = VT
		<input type="checkbox"/> Sun 11:30am	
		<input type="checkbox"/> Sun 1pm	
		<input type="checkbox"/> Sun 5pm	
		<input type="checkbox"/> Sun 7pm	



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