

Kaleidoscope Registration Form

May 2, 2009

Registration postmarked by April 7, 2009

Group Leader Information

Name _____

Address _____

City _____ State _____

Zip _____

Day Phone _____

E-mail _____

Confirmation will be sent via e-mail

Church _____

Required Information

_____ # of Children

_____ # of Adults (need 1 adult per 7 kids)

Total # _____ X \$5 = _____

You must send in:

A Signed Sponsor form for each adult

Registration fee

This completed form

You must bring with you to Kaleidoscope:

A Medical Release form for each child

Sack Lunch (drinks provided)

Bible, pen, paper

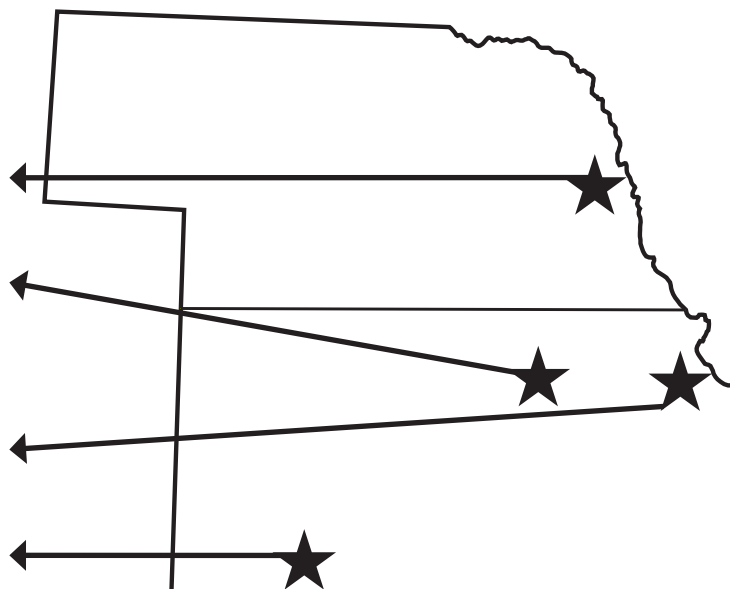
Circle your choice of location

1st Baptist, Bellevue, NE

Ogden Baptist, Ogden, KS

Parkway Baptist, Kansas City, KS

1st Southern Baptist, Liberal, KS



Send Registration and payment to:

KNCSB WMM

5410 SW 7th St.

Topeka, KS 66606

Make Checks payable to KNCSB

Registration must be postmarked by April 7.

Please list any special needs
on the back of this form.

All fees are non-refundable but may be transferred
to a new camper or adult. Please send in new
sponsor forms if a change is made.