

New Testament Church of Christ (Holiness) USA

1941 W. Florence Avenue Los Angeles, California 90047

Eld. Robert Hendricks, Pastor



Tel: 323-750-2211

www.NewTestamentChurchLA.org

Community Outreach Music Program Ages 8-16 / Recorder

Students first & last name: _____

Students age: _____ Students grade: _____

Parent's name: _____

Address: _____

City: _____ Zip code: _____ Phone: _____

Emergency Contact Name: _____ Contact # (____) _____

E-mail address: _____

Allergies:

Please list all allergies and medications for you child/children, including medications, foods, dyes and iodine. For each item, please include a description of the reaction.

My child has no known allergies.

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Medications:

Please list all prescription & over-the-counter medications(drugs) including eye drops, patches and injections (including vitamins & herbal products).

My child is not taking any medications.

<i>Medication name</i>	<i>Strength</i>	<i>Pill/injection</i>	<i>How often?</i>	<i>Reason</i>	<i>Stop date</i>

Doctor information

Name: _____ Phone #: _____