

New Covenant Fellowship Church  
Fall, 2008



WHEN: 9/10 ~ 12/10/08, Wednesdays 7pm ~ 8:30 pm  
언제: 9/10 ~ 12/10/08, 매수요일 저녁 7시 ~ 8:30

FOR WHOM: Age 3 ~ 5<sup>th</sup> Grade  
대상 만 3세 ~ 5학년

REG. Fee: 1<sup>st</sup> child: \$ 65, Siblings: \$ 55 each  
Payable to "NCFC"  
등록비 첫째 자녀: \$65, 둘째 이후: \$ 55 씩

REG. place: Promiseland Registration Table / Mail in  
등록처: 초등부 접견대 / 우편 등록

For more info: Yulmi Shin 신율미 (301-444-3100 ext. 335)  
문의

Mail to:  
New Covenant Fellowship Church  
18901 Waring Station Rd, Germantown, MD 20874  
Attn: AWANA  
301-444-3100 [www.fellowshipusa.com](http://www.fellowshipusa.com)

Child's name/한글 이름)	DOB (생년월일)	Age/ Grade	Girl / Boy
1.			
2.			
3.			

Parent's Name (부모성함):

Attends church (교회출석) ( ) no ( ) NCFC other \_\_\_\_\_

Phone # (H) \_\_\_\_\_ (C) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone # \_\_\_\_\_

긴급시 연락처 \_\_\_\_\_

Allergies (알레지): \_\_\_\_\_

Registration Fee (등록비):

1<sup>st</sup> Child: \$ 65 Siblings: \$ 55 each  
첫 자녀: \$ 65 둘째 이후: \$ 55 씩

Payment: Amount \$ \_\_\_\_\_ Cash ( ) or Check: # \_\_\_\_\_

I give my child permission to participate in the NCFC AWANA including all activities from Sep. 10 – Dec. 10 at New Covenant Fellowship Church MD Campus. I understand that reasonable caution, chaperones and supervisors will be provided by the church and the church staff, but they cannot guarantee the safety of my child. NCFC will not be held responsible for any injuries or accidents. In the event I cannot be reached in an emergency, I hereby give permission for my child to be treated by a physician or hospital selected by a staff member in charge.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_