



Friendship House Roanoke, Inc.

540-343-5437

635 Elm Ave. SW Roanoke, VA 24016

fhroanoke@gmail.com

Christmas Store Registration Form

CHILD'S INFORMATION

Name 1.) _____

Birthday: _____/_____/_____ Age _____

Circle one: Boy Girl

Name 2.) _____

Birthday: _____/_____/_____ Age _____

Circle one: Boy Girl

Name
3.) _____

Birthday: _____/_____/_____ Age _____

Circle one: Boy Girl

PARENT/GUARDIAN INFORMATION

Parent/ Guardian

Name(s): _____

Parent/Guardian and child's home

address: _____

Phone #:

Home _____ CELL _____ WORK _____

Photo Release: "I give permission for my child to be photographed for photos used by Center staff to show area churches and members the ministry work being done. I understand these photos will not be sold or used in any harmful way, but rather to help tell our story and mission."

Signature _____ Date: _____

****We will call you to set up a time to visit the Christmas store.****