

SOUTHERN BAPTIST CHURCH GRADUATE REGISTRATION FOR YEAR 2020

Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

School: \_\_\_\_\_

Grade Level Graduating From (Please check one)

Pre-K \_\_\_\_\_

Kindergarten \_\_\_\_\_

Elementary \_\_\_\_\_

Middle School \_\_\_\_\_

High School \_\_\_\_\_

College \_\_\_\_\_ Please state degree receiving \_\_\_\_\_

School Participation: \_\_\_\_\_

Awards Received: \_\_\_\_\_

Future Plans: \_\_\_\_\_

Church Participation: \_\_\_\_\_

**Note: Proof of graduation may be required. Must be a member; any questions or concerns please see Sis. Cheryl Bradley or call our church office.**