

**The Incredible Race Registration Form  
Gloria Dei Lutheran Church  
July 22 - 26, 2018**

Student's Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

ZIP: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Emergency Contact Number: (\_\_\_\_\_) \_\_\_\_\_

Allergies or Special Needs: \_\_\_\_\_

Member of which Church: \_\_\_\_\_

Grade Completed: \_\_\_\_\_

Need Transportation: \_\_\_\_\_