

Individual Registration Form

Kentucky Christian University
February Invitational Tournament

Name _____ Graduation Year _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ E-Mail _____

Birthday _____ Male Female

Parent's Name _____ Parent's Phone (_____) _____

Church Name _____ City _____ State _____

Kentucky Christian University Bible Bowl Tournament

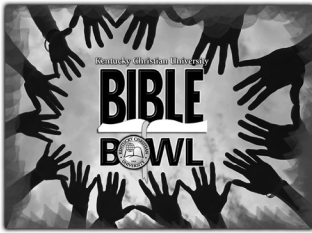
KCU Box 761 • 100 Academic Parkway • Grayson, Kentucky 41143-2205
For More Info: Phone: (606) 474-3252 • Fax: (606) 474-3155 • www.kcu.edu

For Office Use Only:

ID# _____

Church ID# _____

ATTENTION SPONSORS: Bring this registration form with you and present it when your team registers for the Tournament. Please photocopy the number of forms you need for your team members.



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