

Children's Ministries

EXIT PASSPORT APPLICATION

Last Name _____ First Name _____

Address _____

City, State, Zip Code _____ Telephone Number _____

Birthdate _____

Parent's Signature _____

NOTE: A passport entitles the named applicant to be released from Sunday and Wednesday services. It may not be used to release younger siblings from their Wugg rooms.

Please leave the upper portion of this passport application at the Welcome Desk next to the _____.

ÈEmail R á Ò!^^à@ncbc.church a "close-up" picture of your child with a solid background ~ • ã * subject line: "o@ãAæ ^", this picture , q|A^A•^âA[A@]A^} c~ A[~!A&@ãÄã & A@^ Á@ç^Aã ÁcãUæ•][!Á Ü^|æ^Á[ã^È

W[] Á&ã ç Á Ác Á[{ Áã áA[~!A&@ãÄã c~!^È our child, q|Aç^Aã ÁÁã ç } ÁcãAæ ^Áæ Áã }ãã *Á[~!A&@ãÄã { æ Áç^Aã äQ~ çãAæ } ç^^ãã *Á[Áã Ác{ Á] Á[{ Áæ•ÈV@!^A Á[Á^^áA[A&@ãÄã] Áæ•][!È

Office Use Only

Photo: _____ Notified: _____

Processed: _____ Rcvd: _____

Cut on this line; keep bottom portion.

Children's Ministries

TEMPORARY EXIT PASSPORT

Last Name _____ First Name _____

Address _____

City, State, Zip Code _____

Telephone Number _____ Birthdate _____

Parent's Signature _____

NOTE: This temporary passport entitles the above-named applicant to be released from Sunday and Wednesday services.

A passport may not be used to release younger siblings from their rooms.

Please keep this copy for your Temporary Exit Passport use.