



Registration Form

Name: _____

Address: _____

Phone (day) _____

Phone (eve) _____

Email _____

It would be most helpful if you could give us an idea of your age _____

Simply mail this form to:
Brooklyn Park Evangelical Free Church
7849 West Broadway
Brooklyn Park, MN 55445
Attn: Pastor Dan Carlson

Or

Email as an attachment to:
dcarlson@bpefc.org