



ROCK SPRINGS CHRISTIAN ACADEMY

Parent Teacher Fellowship

Parent Registration Form:



Please Print

Parent Name:

Cell Phone: (..) -

Yes I Would You Like To Receive Text Messages? Please List Cell Phone Provider Below

.....

Email:

Students:

Name(s)

Grade(s)

.....

.....

.....

.....

.....

.....

.....

.....

Signature:

(Signature indicates permission to receive all forms of communication from RSCA and PTF organizers including phone, texts, emails, etc.)

*Let us consider one another in order to stir up love and good works...exhorting one another and so much more as you see the day approaching. **Hebrews 10:24-25***