

# BEHOLD

FLY 2025 | JOHN 1:29

Information you will need to have ready to register as an **Adult/Child**:

Name

Gender

Cell Phone Number

Email

Mailing address

Birth Date

Emergency Contact Name

Emergency Contact Phone Number

Group Attending FLY (Dropdown to select your church/group)

\*Note Group Leader info will auto fill.

Health Insurance

Family Physician Information

Allergies

Medications

Select your payment preference (Credit Card or Check)

Select your payment option (Deposit or Full Payment)