

**2024 Fine Arts  
Group Registration Form**

[Please Print in Ink or Type]

**Deadline: MARCH 20, 2024**

**Mail to: NHM 3905 S. Elm Place  
Broken Arrow, OK 74011**

<i>Category Code:</i> _____
<i>Group Name:</i> _____
<i>Church Name:</i> _____
<i>Coach's Name:</i> _____
<i>Number in Group:</i> _____ <i>Page</i> _____ <i>of</i> _____
<i>Coach's Signature:</i> _____
<i>Coach's Email:</i> _____
<i>Coach's Cell #:</i> _____

1) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

7) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

2) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

8) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

3) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

9) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

4) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

10) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

5) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

11) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

6) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_

12) Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ ST \_\_\_\_\_  
Zip \_\_\_\_\_ DOB \_\_\_\_\_  
Phone # \_\_\_\_\_