

**Child Registration Form  
Adoption Celebration 2005  
Northwest Region**

Child's Name: \_\_\_\_\_

DCN: \_\_\_\_\_

County of Jurisdiction: \_\_\_\_\_

DOB: \_\_\_\_\_

Person who will be bringing this child:  
\_\_\_\_\_

T-Shirt Size (specify child or adult): \_\_\_\_\_

Referral sent by: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Please send in a copy of the signed Release for Special Recruitment Efforts when sending in this registration form no later than September 1, 2005 to:

Kerry Carney  
Saline County Children's Division  
1239 Santa Fe Trail, Suite 100  
Marshall, MO 65340  
660-886-5562  
660-886-4183 Fax

Sponsored by: [The Pettis County Community Partnership](http://www.pettiscommunitypartners.org)



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