



Children's Ministry Registration Form 2010/2011

For Office use only:

Date: \_\_\_ / \_\_\_ / \_\_\_  New  Update

Visitor:  1st time  2nd time  Out-of-Town guest of \_\_\_\_\_  New in the community

Children: Please include names of all children ages 3 - 5th grade. If more than three children please use a separate form.

Please indicate program(s) your child(ren) plan to attend with an X

Table with 10 columns: Child's Last Name, Child's First Name, Gender M/F, Date of Birth, Age, Grade entering 2010/11, Nursery, Bible BLAST 9:30am, Worship & Wonder (Indicate 8:00 or 11:00am), Midweek Friends (Fall/Spring). Rows 1-4.

Family Information:

Mother: First Name \_\_\_\_\_ Last Name(if different from child) \_\_\_\_\_

Father: First Name \_\_\_\_\_ Last Name(if different from child) \_\_\_\_\_

Guardian/Other: First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: Home:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell:(\_\_\_\_) \_\_\_\_ - \_\_\_\_

Alternate Contact: (other than Parent/Legal Guardian) if the parent/guardian cannot be reached

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to child:  Grandparent  Aunt/Uncle  Neighbor  Friend  Other \_\_\_\_\_

Phone:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Phone Type:  Home  Work  Cell

Phone:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Phone Type:  Home  Work  Cell

Please list any medical conditions, allergies, or special needs of your child(ren):

\_\_\_\_\_  
\_\_\_\_\_

Medical Release:

If the parent or legal guardian(s) of child(ren) listed above cannot be reached at the time of an emergency and if, in the judgment of the church staff, immediate observation or treatment is urgently required I authorize and direct the church staff to secure necessary emergency medical attention. I understand that I will assume full responsibility for the payment of any services rendered.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Photo Release:

I grant permission for the use of photographs or electronic images of my child(ren) taken by or on behalf of Northminster Presbyterian Church for promotional/informational purposes, church publications and programming materials, including the church website.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

