

Moorpark Presbyterian Church
Children's Ministries
Sunday Morning Registration Form 2008-'09

Please complete both sides

Today's date _____

Child's Name _____ M/F
Last Name First (nickname)

Address _____
Street City Zip

Home phone (____) _____ **Birthdate** _____
Month/ day / year

Age _____ Grade _____ School attending _____

Parent/Guardian Information:

Dad's Name _____

Home# _____ cell phone # _____

Mom's Name _____

Home# _____ cell phone # _____

Additional address of parent/child:

_____ Street City Zip

Very Important! Where can we reach you during Sunday School Hour?

- Adult Sunday School
- Youth/child classrooms
- Other cell # _____

Following Sunday School/Celebration, my child will be picked up by _____

Child Health Information:

For the safety of your child, please complete fully.

Allergies Food _____ Medicine _____
Insects _____ Other _____

Any special medications? _____

Is your child prone to seizures? If yes, please explain _____

***Please personally inform teachers
and/or children's ministries staff
of any of your child's special needs or concerns this year.
(We want to make your child's time at church the very best it can be!)***

Please complete registration by signing the contract &
authorization on the back.

I/We understand that this Registration Form is a *commitment* our family is making to *regularly* and *consistently* attend Sunday School and Celebration this year. We will make Sunday morning worship and Christian education a family priority when planning and committing to other activities.

Signature of Parent or Legal Guardian of child

Date

This permission form covers dates Sept. 7, 2008 through Sept 7, 2009..

I/we give permission for my above-named child to participate in the Sunday morning ministries of Moorpark Presbyterian Church. I/we hereby release Moorpark Presbyterian Church, its staff and sponsors, from responsibility and liability for any injury or illness that my child may sustain during any activity. I/we further understand that we and/or our insurance carrier assume full responsibility for all payments and costs of said emergency treatments.

I/we also understand that my child may be photographed during these Sunday morning programs, participating in the various activities. I authorize permission for photos of my child to appear on the website of Moorpark Presbyterian Church at www.mppres.org. My child's name will not be used on the website.

Signature of Parent or Legal Guardian of child

Date

*Please return completed form to the church office or to your child's
Sunday School teacher.*

THANK YOU!