

Parents, please give us complete and accurate information so that we can best provide for and protect your child. Please print or type the following information:

Child's Name _____ Date of Birth _____

Mailing Address _____

City _____ State _____ Zip _____

Street Address (if different from above) _____

Preferred Phone _____ (Home) (Cell)

Email Address _____

Parent/Guardian Name _____

Parent's Place of Employment _____

Work Phone _____

School Attending _____

Grade _____ Teacher's Name _____

Dismissal Time _____

Does your child have any food allergies? _____

Does your child have any medical conditions of which we should be made aware? _____

Emergency Contact _____

Phone Number _____

My child will ride the church bus/van from school to the church.

I grant permission for my child to be picked up from school by First Baptist Church staff or persons designated by the church on Tuesday afternoons for Church Street Kids Club @ FBC Bartow.

Parent Signature _____ Date _____

Please give us direction concerning your child's pickup at the church at 5:00 pm:

I will pick up my child

Someone else will pick up my child _____

Other: _____

Parent Signature _____ Date _____

**A copy of this form will be provided to for the principal's office at your school. Please send a note with your child on the first morning of Church Street Kids Club @ FBC Bartow reminding the teacher that the First Baptist Church bus/van will pick them up on Tuesday afternoons.

