



## Calvary Chapel Morgantown's Children's Ministry Child Registration Form

### Child #1 Information

Child's Full Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Current Grade: \_\_\_\_\_

List any allergies, medical conditions, and/or special instructions we should be made aware of about your child.

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### Child #2 Information

Child's Full Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Current Grade: \_\_\_\_\_

List any allergies, medical conditions, and/or special instructions we should be made aware of about your child.

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### Child #3 Information

Child's Full Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Current Grade: \_\_\_\_\_

List any allergies, medical conditions, and/or special instructions we should be made aware of about your child.

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### Parent/Guardian Information

Parent/Guardian's Full Name: \_\_\_\_\_ Email Address<sup>1</sup>: \_\_\_\_\_

Mailing Address<sup>1</sup>: \_\_\_\_\_

<sup>1</sup>By providing your email and mailing address, you agree to receive Children's Ministry birthday cards for your child/ren and emails regarding updates, cancellations, events, etc. within this ministry.

Main Cell Phone Number<sup>2</sup>: \_\_\_\_\_ Alternate Cell Phone Number: \_\_\_\_\_

<sup>2</sup>This is the first number we'll call if we need to reach you during the Children's Ministry sponsored event.

### Photography Authorization

In order to share ministry events and updates with the fellowship and to develop future promotional items (i.e. church bulletin boards, website, brochures, etc.), Children's Ministry will sometimes take video and/or images of the children during Children's Ministry sponsored events. Please note that no child will be individually named.

☐ Yes, I give my consent for photography.

☐ No, I do not give my consent for photography.

By completing this form, I assume all risk of my child/ren and/or myself participating in Children's Ministry sponsored events. I acknowledge that any activity may pose some risk of personal injury, and that I undertake and assume this risk for myself and my child/ren.

Printed Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_