

# Welcome to Solid Ground Kids!



Your Name: \_\_\_\_\_

Main Phone: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Child(ren)'s Information

Last Name	First	M/F	Birth Date	Age	Grade
1					
Allergies/Special Needs					
2					
Allergies/Special Needs					
3					
Allergies/Special Needs					
4					
Allergies/Special Needs					

Other approved people for my child(ren) to be picked up:

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

I authorize any of the above individuals to pick up my child from Solid Ground Kids.

In the case of Emergency in which I cannot be reached, I authorize Solid Ground Staff to administer first aid or to seek medical attention for my child.

Solid Ground Church Routinely takes pictures to be used on the website, facebook, Instagram, and other publications. Understanding this, I give authorization for photos to be posted of my child(ren).

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Date

FOR SG USE ONLY  
Family Name: \_\_\_\_\_