

Wacky Wednesday Registration 2018-2019

Today's Date: _____

Please circle which group your child will be in:

JAM (Preschool) GLOW (K-1st grade) CLI CK (2-5th grade) Birthdate: _____

Youth Name: _____ Grade: _____

Parent(s): _____

Address: _____ City _____ Zip _____

****Email Address: _____

Home Phone: _____ Cell Phone: _____

Best phone number to contact parent on a Wednesday night:

Emergency Phone number if parent cannot be reached:

Contact Name: _____ Phone: _____

Food Allergies or medical concerns: _____

Would you be willing to occasionally help in your child's class? Yes ___ No ___

Field Trip Permission: I give permission for _____ to participate in field trips sponsored by Christ UMC within a ten-mile radius of the church. I understand that field trips would include the use of church property. This permission is granted for trips taking place between September 2018 and until the end of May 2019.

Parent Signature: _____ Date: _____

Permission to Photograph: Occasionally we post video or photos on our website (www.christchurcheastmoline.org), our Facebook page or the newspaper. If you do not want your child's photo to appear in these public forums, please make your wishes known below.

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_____ I do not want my child's photo to appear on any printed, video or internet communications from the church.

Parent Signature: _____