

# Registration Form



Today's Date: \_\_\_\_\_

**Campus and Service:**

Columbia Station Main:     Saturday at 5:00 p.m.     Sunday at 9:30 a.m.     Sunday at 11:00 a.m.  
Elyria West:     Sunday at 9:30 a.m.     Sunday at 11:00 a.m.

**1. Name:** \_\_\_\_\_  Male     Female  
Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Primary Address: \_\_\_\_\_  
Allergy Alerts/Primary Concerns: \_\_\_\_\_  
For snack child can have:     Goldfish Crackers     Pretzels     Cheerios

**2. Name:** \_\_\_\_\_  Male     Female  
Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Primary Address: \_\_\_\_\_  
Allergy Alerts/Primary Concerns: \_\_\_\_\_  
For snack child can have:     Goldfish Crackers     Pretzels     Cheerios  
*\*see back to register additional children*

**Mother/Legal Guardian:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Address (if different): \_\_\_\_\_  
Presently attending services today?     Yes     No

**Father:** \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Address (if different): \_\_\_\_\_  
Presently attending services today?     Yes     No

Who else is allowed to pick up your child? \_\_\_\_\_  
Person registering child if NOT parent/guardian: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Explain any custodial issues we may need to be aware of: \_\_\_\_\_  
\_\_\_\_\_

**Please read and initial each:**

- Occasionally Christ Church uses photos taken of children during programming for promotional purposes. Children are never identified by name in photos. \_\_\_\_\_
- I understand that I am responsible for verifying all medical and allergy information, pertaining to any children I sign in, is properly printed on their name tag. \_\_\_\_\_
- I understand I must have the parent portion of my child's name tag to pick them up after the service. In the event of a lost or missing tag children will only be released to those listed on this registration form. \_\_\_\_\_

\_\_\_\_\_  
Signature of person registering child(ren):

3. Name: \_\_\_\_\_  Male  Female

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_

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

Allergy Alerts/Primary Concerns: \_\_\_\_\_

For snack child can have:  Goldfish Crackers  Pretzels  Cheerios

4. Name: \_\_\_\_\_  Male  Female

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_

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

Allergy Alerts/Primary Concerns: \_\_\_\_\_

For snack child can have:  Goldfish Crackers  Pretzels  Cheerios

5. Name: \_\_\_\_\_  Male  Female

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_

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

Allergy Alerts/Primary Concerns: \_\_\_\_\_

For snack child can have:  Goldfish Crackers  Pretzels  Cheerios