



Children's Church Registration Form

(One Per Child)

Child's name: _____ Age: _____ Date: _____

Allergies: yes no If yes, is an Epi pen needed: yes no

Allergies/medical conditions: _____

Parent/Responsible adult: _____

Cell phone #: _____ Email: _____

Parent/Responsible adult: _____

Cell phone #: _____ Email: _____

By checking the boxes below, you indicate you've read and understand the Children's Church Guidelines.

All children will be signed in/out at the registration table. Your child will only be released to the person who presents with a matching name tag.

Children's Church begins at 11:00 and concludes at 12:30 or immediately following the church service. Please be prompt in picking up your child.

You must remain on the church premises at all times while your child is in Children's Church. You will be texted if your child needs you.

Your child must be independent with toileting tasks in order to attend Children's Church without a parent or responsible adult.

If your child develops a new allergy and/or has a change in their medical condition, please let us know and fill out a new registration form with the updated information.

Sign: _____ Date: _____