

Children & Youth Ministry Registration

Date: _____

Last Name _____ Parent(s) _____

Address _____

Phones (h)/(c) _____

Emails _____

Child's name _____ Grade in Sept _____ Birthdate _____ age _____

Allergies or concerns _____

Child's name _____ Grade in Sept _____ Birthdate _____ age _____

Allergies or concerns _____

Child's name _____ Grade in Sept _____ Birthdate _____ age _____

Allergies or concerns _____

Child's name _____ Grade in Sept _____ Birthdate _____ age _____

Allergies or concerns _____

Authorization for Media Release

On occasion we like to use the photos or videos of our children to enhance the communication and ministry of our congregation. They might be used in Sunday School or youth group activities, bulletin boards, or Church services. In addition, they may also be used on the church's website or Facebook page. In all cases, only first names would be used.

I give my permission for my child(ren) to be photographed or videotaped for each of the following:

Please initial _____ For use within the church (projects, bulletin boards, church service)

Please initial _____ On social media including the newspaper, church website and/or Facebook page

I do not give my permission for my child(ren) to be photographed or videotaped.

Parent/Legal guardian (*please print*)

Parent/Legal guardian Signature

Date

Comments and Questions

I have questions about the Children & Youth programs, please call _____

I have questions about the church, please have the pastor call _____

I am interested in helping with the Children & Youth programs _____

Comments/Questions: _____
