

**PHOTO RELEASE:**

I, the undersigned, give my permission for my child/ren to be photographed. Their photo could be used for décor in our classrooms, promotional use and possibly on our website. No names will be released.

Questions? Contact Allison Loveland  
Kid's Ministry Director

# Wednesday Night Clubs Kid Registration Form

Please fill out one form per family and print clearly. Thank you.

**Child Information**

1. Child's Name \_\_\_\_\_

Child's DOB \_\_\_\_\_ Child's Grade \_\_\_\_\_

2. Child's Name \_\_\_\_\_

Child's DOB \_\_\_\_\_ Child's Grade \_\_\_\_\_

3. Child's Name \_\_\_\_\_

Child's DOB \_\_\_\_\_ Child's Grade \_\_\_\_\_

**Allergies/Additional Info**

-Please list any allergies your child has or any additional info you would like us to know

-So that we may better serve your child please indicate if you would like a member of our special needs team to contact you

**Parent(s) / Guardian(s) Information**

Name of Parent(s)/Guardian(s) \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Home Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_

**Alternate Pick-Up/Emergency Contact**

During Wednesday Night Clubs, you may have one other person other than the parent/guardian pick-up your child. This person must be 18 years of age and must have a valid I.D. when picking up the child.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Cell Phone \_\_\_\_\_ Relationship to the Child \_\_\_\_\_

**---Bottom portion to be completed by Administration---**

**Registration Fees:**

**Registered:**

**Paid: Check    Cash**

Pre-K and K: \$10    1st&2nd Voyagers Girls and Boys: \$10    3-5th Stockade Boys: \$20    3-5th Pioneer Girls: \$20

\*Limited scholarships are available for families who need assistance- please see Allison Loveland (Kid's Ministry Director)