

# CHILDREN AND FAMILY INFORMATION SHEET

Date: \_\_\_\_\_

## About the Adults:

Name \_\_\_\_\_ Relationship with child \_\_\_\_\_

Name \_\_\_\_\_ Relationship with child \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Home phone \_\_\_\_\_ Cell/s \_\_\_\_\_

Email \_\_\_\_\_

## About the Children:

Name \_\_\_\_\_

Birthdate: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_ Grade if in school \_\_\_\_\_

Things we should know: (allergies, instructions) \_\_\_\_\_

Name \_\_\_\_\_

Birthdate: Mo \_\_\_\_ Day \_\_\_\_ Yr \_\_\_\_ Grade if in school \_\_\_\_\_

Things we should know: (allergies, instructions) \_\_\_\_\_

Please list the names of those who have permission to leave the classroom with your child.

- 1.
- 2.
- 3.

\_\_\_\_ I understand that photos/videos may be taken during children's programming/events and give permission for my child to have his/her picture used for publicity in photo or video representations, on the church web site or on the classroom door.

\_\_\_\_\_(Signature and date)

Please return registration form to the North United Methodist Church office.

For more information or questions contact Janet Wanner at [jwanner@northchurchindy.com](mailto:jwanner@northchurchindy.com)

