



1st – 5th Grades Registration 2009 - 2010

Today's Date:

Please complete this form and return to the Coordinator on Sunday morning. Be sure to update this form as information changes.

Child's First Name:	Child's Last Name:	Date of Birth	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade:
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Family Information

Parent(s) Name(s):	Father's Cell Phone:	Mother's Cell Phone:	Home Phone:
Street Address:	City:	Zip:	Email Address:

Emergency contact, other than parents:

Name:	Relationship to Child:	Home Phone:	Cell Phone:
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For the safety of your child, people that will be dropping off and picking up your child, including parents

Name:	Relationship to Child:	State and Driver's License Number:
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Name:	Relationship to Child:	State and Driver's License Number:

Medical Information

List any medical conditions, including severe allergies:	<ul style="list-style-type: none"> Does your child have a life-threatening condition that could require emergency medication? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, will you be sending this medication with your child to church? <input type="checkbox"/> Yes <input type="checkbox"/> No <p><i>If you are sending medication with your child, please fill out an Emergency Medication Release Form.</i></p>
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Emergency Medical Authorization

I, the undersigned parent or guardian, do hereby authorize emergency medical, dental, health or hospital services be rendered to my child upon consent of a Legacy Church staff member or designated volunteer. The purpose of this authorization is to permit my child to receive emergency medical attention when I, the parent or guardian, or my emergency contact is unavailable to give such consent. This authorization shall be effective from August 2009 through August 2010.

Signature of Parent or Guardian:	Date:
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Parental Involvement

Your involvement in KidStreet is a great way to help kids trust Jesus! Please indicate which Sunday(s) each month you are willing to serve:

1st Sunday 2nd Sunday 3rd Sunday 4th Sunday 5th Sunday Substitute Already Volunteering Area:

Please complete the volunteer form in your child's welcome packet and return to the Kid's Ministry Office or a Coordinator.

