



Christ Church Cambridge Programs for Children and Youth 2010–2011 Registration Form

Child's Name *(Please use one form per child/youth)* _____

Parent/Guardian Name _____

Parent/Guardian Name _____

Best Phone Numbers _____

Current Address (Street, City, State, Zip) _____

Emergency Contact Phone _____

Best Email Contacts _____

Date of Birth _____ Age as of 9/1/2010 _____ Grade as of 9/2010 _____

Check all that may apply:

- | | |
|--|---|
| <input type="checkbox"/> Day Care (Infant – 3 Y.O.) | <input type="checkbox"/> Christian Education for 7 th and 8 th graders |
| <input type="checkbox"/> Pre-School Godly Play (3 – 4 Y.O.) | |
| <input type="checkbox"/> Godly Play for Kindergarteners | |
| <input type="checkbox"/> Godly Play for 1 st and 2 nd graders | <input type="checkbox"/> High School or Junior High Youth Group – Sunday and weekday activities |
| <input type="checkbox"/> Godly Play for 3 rd and 4 th graders | <input type="checkbox"/> Youth Choir (3 rd – 8 th Grade) |
| <input type="checkbox"/> Christian Education for 5 th and 6 th graders | <input type="checkbox"/> Acolytes (3 rd grade – High School) |

Important Information (health concerns, medications, etc.) _____

Parent Signature

Date

Occasionally, we photograph children participating in church programs for use on bulletin boards and publications. If the photographs are used, we do not identify children by name. Please check the appropriate box and sign below.

- Yes, I would allow my child to be photographed for these purposes and under these conditions.
- No, I do not allow my child to be photographed.

Parent Signature

Date