

First Church of Christ, Old North Church
2016-2017 Children's Church Registration Form (children ages 3yrs – 6th grade)
2016-2017 Infant/Toddler Room Registration Form (children < 3yrs)

Parent or Guardian Name(s) _____

Home Address _____
Street City Zip

Home phone _____ Email address _____

Mother's cell phone _____ Father's cell phone _____

Child's Name _____ Date of Birth _____

Age as of September _____ Grade as of September _____

Are you on Facebook? Y/N

- 1) Please describe any special needs (for the child above) including allergies, health issues, regular medications or release restrictions:

- 2) To assist us in estimating weekly attendance and planning supervision accordingly, do you anticipate any prolonged time periods where your child(ren) will not be attending Children's Church (i.e. fall/spring sports conflict, ski season, etc)? If so, please provide details _____

- 3) **Parent volunteer support in Parish Hall is instrumental to the success of this children's program.** We anticipate large attendance numbers on many Sundays. For those registering for Children's Church, we are looking for a parent from each family to volunteer their time at least 2 Sundays in the coming year (or more if you wish!). We will be sending a signup genius shortly and ask that you provide an email address for that purpose below. Alternatively, if you have specific dates in mind now, please just include them below and we will secure that date in advance for you. **We encourage you to sign up early to guarantee your first choice of dates.**

Contact Name and Email Address for Signup Genius: _____

Dates you wish to volunteer (if you prefer to secure your dates prior to the Signup Genius being distributed):

Please note: **For additional children, please see 2nd page.** (Children attending **third grade** will receive a gift bible inscribed with their name as it appears on the registration form.)

\$35 suggested donation per family at the time of registration. Donation to cover supplies, materials and activities throughout the year.

Please make checks payable to *Old North Church*. (8 Stacey Street, Marblehead, MA 01945)
_____ cash _____ check

Continue to 2nd page for Media Release and Parent Signature

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MEDIA RELEASE: I give permission for photos/writings of my child/children to appear in promotional materials and news articles for First Church of Christ in Marblehead (Old North Church), UCC according to my preferences below. I acknowledge that my child's/children's work and/or photo may be posted within the church buildings or included in church mailings unless I provide a written request to the contrary.

The First Church of Christ in Marblehead (Old North Church), UCC has my permission to use my child's/children's photos/writings for (check all that apply)

- ☐ Newspaper articles (circle) with / without name attached.
- ☐ Church website/ Facebook Page (no individual names will appear in picture captions)
- ☐ Online articles written for or used by the Massachusetts Conference of the United Church of Christ website (no individual names will appear in the picture caption)
- ☐ Signage posted on property other than Old North Church (i.e. flyer for a church event posted in a store window).

For families with more than one child:

<p>Child's Name _____</p> <p>Age as of September _____</p>	<p>Date of Birth _____</p> <p>Grade as of September _____</p>
<p>Please describe any special needs including allergies, health issues, regular medications or release restrictions:</p> 	

<p>Child's Name _____</p> <p>Age as of September _____</p>	<p>Date of Birth _____</p> <p>Grade as of September _____</p>
<p>Please describe any special needs including allergies, health issues, regular medications or release restrictions:</p> 	

<p>Child's Name _____</p> <p>Age as of September _____</p>	<p>Date of Birth _____</p> <p>Grade as of September _____</p>
<p>Please describe any special needs including allergies, health issues, regular medications or release restrictions:</p> 	

Parent's signature

Date