

Family Ministry and Sunday School Registration Form 2018-2019

Catalina United Methodist Church

Please complete a registration form for EACH child

Child's Name: _____

Date of Birth: _____ Grade in school: _____

Parent/Guardian Name: _____

Address: _____

_____ Zip Code: _____

Cell Phone: _____ Additional Phone: _____

Relationship to child: _____

E-mail Address: _____

Additional Parent/Guardian Information (if applicable)

Parent/Guardian Name: _____

Address: _____

_____ Zip Code _____

Cell Phone: _____ Additional Phone: _____

Relationship to child: _____

E-mail Address: _____

Please provide some information about your child to help us understand their needs.

Child's health issues or allergies: _____

What are your child's special interests, strengths, or needs:

Emergency contact information:

Parent's location during the 10am Sunday School Hour: _____

Additional contact person: _____ Phone #: _____

Names of other adults who have permission to pick up your child :

Photo Release

I give my permission for images and video of my child to be taken and used in church publications including online and in social media. Parent signature _____

* 11:00am Sunday Worship in the Sanctuary is Live Stream and saved on the church website.