

Child Registration Form

Please verify and complete the information below and return to the church office.
To view our Privacy Statement, please visit www.carrutherscreek.ca/privacy or request a copy from the office.

What Ministry are you registering your child for?

Family Last Name

Parents First Names Street Address Mailing Address

City Cell Phone

State/Prov Fax No.

Postal Code Email Address

Home Phone Family Church Affiliation

Child Information Section

First Names Gender Medical Number

Middle Name Birth Day dd/mm/yy / / Family Doctor

Last Name Doctor Phone

Incase of an emergency with my child, contact the following person, if I am not available.

Name Relationship to Child Phone #

Child Allergies

Special Needs

PERMISSION AND PARTICIPATION

Permission & Participation: I understand that not all youth events are held at the church. I give my permission for my son/daughter to participate in events that take place at/away from the church facility.

Yes

No

Photos & Videos: I give permission for all C4 staff and volunteers to photograph or video my child(ren) during church functions, and I give permission to Carruthers Creek Community Church to publish photographs / video of my child(ren) on C4 websites and/or bulletin boards. On behalf of myself and my child(ren) I further release all C4 staff and volunteers from any and all claims and damages arising from photographs / videos published on the C4 websites and/or bulletin boards.

Yes

No

I hereby confirm the information given in this form is current and accurate

Parent/Guardian - Print Name

Parent/Guardian - Signature

dd

mm

yyyy