

Children & Youth Ministry Registration

2022-2023

Fill out one form per family

Family Information:

Primary Mailing Address _____

Secondary Mailing Address _____

Send information to both addresses

Guardian Name _____

Preferred Number _____ Cell/Home

Phone 2 _____ Cell/Home

Email address _____

Preferred Communication: Phone _____ Email _____

Guardian Name _____

Preferred Number _____ Cell/Home

Phone 2 _____ Cell/Home

Email address _____

Preferred Communication: Phone _____ Email _____

Guardian Name _____

Preferred Number _____ Cell/Home

Phone 2 _____ Cell/Home

Email address _____

Preferred Communication: Phone _____ Email _____

Emergency Information:

Emergency Contact & Relationship _____ Phone Number _____

Approved Persons for Pick-up _____

Names of Extended Family at BMPC _____

IMAGE/NAME PERMISSION & RELEASE

Bryn Mawr Presbyterian Church may wish to photograph, videotape, or otherwise record the activities of the Church participants for the purpose of promoting the Church. We will not publish identifying information (i.e. name, grade) in conjunction with an image. I give permission for my child to be videotaped, photographed, and/or recorded, in connection with the Church. I give permission for BMPC to use said videotaped, photographed, and/or recorded materials in BMPC publications, websites, social media, CD's, DVD's or other media, for publicity purposes or in any other non-commercial manner that it chooses. I hereby waive and release any rights that I may have to said videotaped, photographed, and/or recorded materials.

Participant's Name(s) (please print) _____ Yes _____ No _____

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____ Date _____

(Form continued on back)

Participant Information:

Participant 1 Full Name _____ **Preferred Name** _____
Birth Date _____ Current Age _____ Grade as of Sept. 1 _____
Baptized? Yes No Unknown Cell Number _____ Email _____
School Currently Attending _____ School District _____
Special Considerations (including allergies) _____

Participant 2 Full Name _____ **Preferred Name** _____
Birth Date _____ Current Age _____ Grade as of Sept. 1 _____
Baptized? Yes No Unknown Cell Number _____ Email _____
School Currently Attending _____ School District _____
Special Considerations (including allergies) _____

Participant 3 Full Name _____ **Preferred Name** _____
Birth Date _____ Current Age _____ Grade as of Sept. 1 _____
Baptized? Yes No Unknown Cell Number _____ Email _____
School Currently Attending _____ School District _____
Special Considerations (including allergies) _____

Participant 4 Full Name _____ **Preferred Name** _____
Birth Date _____ Current Age _____ Grade as of Sept. 1 _____
Baptized? Yes No Unknown Cell Number _____ Email _____
School Currently Attending _____ School District _____
Special Considerations (including allergies) _____

(For additional children, please use an additional form)

Sign Us Up For:

- Please sign us up to receive the following weekly eNews email:
 Children & Families Nursery (infants, toddlers, 2s) Youth Ministry Fine Arts
 Yes, I would like to receive text message reminders for programs.

