

# Children & Youth Ministry Registration 2020-2021

## **Participant Information (one form for all children & youth):**

**Participant 1 Full Name** \_\_\_\_\_ **Preferred Name** \_\_\_\_\_

Birth Date \_\_\_\_\_ Current Age (in years) \_\_\_\_\_ Grade as of Sept. 1 \_\_\_\_\_

Baptized? Yes    No    Unknown    Cell Number \_\_\_\_\_

School Currently Attending \_\_\_\_\_ Virtual \_\_\_\_\_ In Person \_\_\_\_\_ Hybrid \_\_\_\_\_ School District \_\_\_\_\_

Special Considerations (including allergies, COVID related restrictions) \_\_\_\_\_

**Participant 2 Full Name** \_\_\_\_\_ **Preferred Name** \_\_\_\_\_

Birth Date \_\_\_\_\_ Current Age (in years) \_\_\_\_\_ Grade as of Sept. 1 \_\_\_\_\_

Baptized? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ Cell Number \_\_\_\_\_

School Currently Attending \_\_\_\_\_ Virtual \_\_\_\_\_ In Person \_\_\_\_\_ Hybrid \_\_\_\_\_ School District \_\_\_\_\_

Special Considerations (including allergies, COVID related restrictions) \_\_\_\_\_

**Participant 3 Full Name** \_\_\_\_\_ **Preferred Name** \_\_\_\_\_

Birth Date \_\_\_\_\_ Current Age (in years) \_\_\_\_\_ Grade as of Sept. 1 \_\_\_\_\_

Baptized? Yes    No    Unknown    Cell Number \_\_\_\_\_

School Currently Attending \_\_\_\_\_ Virtual \_\_\_\_\_ In Person \_\_\_\_\_ Hybrid \_\_\_\_\_ School District \_\_\_\_\_

Special Considerations (including allergies, COVID related restrictions) \_\_\_\_\_

**Participant 4 Full Name** \_\_\_\_\_ **Preferred Name** \_\_\_\_\_

Birth Date \_\_\_\_\_ Current Age (in years) \_\_\_\_\_ Grade as of Sept. 1 \_\_\_\_\_

Baptized? Yes    No    Unknown    Cell Number \_\_\_\_\_

School Currently Attending \_\_\_\_\_ Virtual \_\_\_\_\_ In Person \_\_\_\_\_ Hybrid \_\_\_\_\_ School District \_\_\_\_\_

Special Considerations (including allergies, COVID related restrictions) \_\_\_\_\_

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## Family Information (fill out once per family):

Guardian 1 Name \_\_\_\_\_

Preferred Number \_\_\_\_\_ Cell/Home Phone 2 \_\_\_\_\_ Cell/Home

Email address \_\_\_\_\_ Preferred Communication: Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

Guardian 2 Name \_\_\_\_\_

Preferred Number \_\_\_\_\_ Cell/Home Phone 2 \_\_\_\_\_ Cell/Home

Email address \_\_\_\_\_ Preferred Communication: Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

Emergency Contact & Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Approved Persons for Pick-up \_\_\_\_\_

Names of Extended Family at BMPC \_\_\_\_\_

Guardian 3 Name \_\_\_\_\_

Preferred Number \_\_\_\_\_ Cell/Home Phone 2 \_\_\_\_\_ Cell/Home

Email address \_\_\_\_\_ Preferred Communication: Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

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 \_\_\_\_\_

## Sign Us Up For:

Please sign us up to receive the following E-news:  
 Children & Families  Nursery (infants, toddlers, 2s)  Youth Ministry  Fine Arts

Yes, I would like to receive text message reminders for programs.

