

Unitarian Universalist Church of Midland Religious Education Registration

Parent/Guardian Information

Name(s): _____

Address: _____ City: _____ Zip: _____

Cell Number: _____ Home Number: _____

Email: _____

Child(ren)'s Information

Name	Date of Birth	Email	Cell Number

From time to time, we may plan extra activities outside the church for our Religious Education programs. May we have your permission to include your child on these outings? _____

Parent/Guardian signature: _____

Posting Release

Periodically, we post photos of various church activities to our website, newsletter and/or Facebook. May we have your permission to include your child in these postings? _____

Parent/Guardian signature: _____

Medical Release

I hereby acknowledge the caregivers of the Unitarian Universalist Church of Midland to authorize medical treatment of

Name(s) of child(ren): _____

For any emergency illness or injury that may occur while such person is in the care of a Unitarian Universalist Church of Midland caregiver while I am not immediately available to give such consent.

Date: _____ Parent/Guardian signature: _____

Emergency contact (other than parent(s) or guardian): _____

Family Physician and phone number: _____

Allergies: _____

If yes, include action plan:

Known pre-existing medical conditions: _____

If any exist, include action plan:

Would you be willing to assist with the Religious Education program in any of the following areas?

- Greeting newcomers to RE
- Be a doorkeeper for Spirit Play
- Contribute snacks
- Assisting with Social Outreach activities
- Assist with Intergenerational Services
- Serve on the RE Committee
- Teach/co-teach Pre-Teen/Teen class
- Help with RE Work Party

Please use the space below for any additional comments or notes you wish to share regarding your child's/children's religious education, background, special needs, etc.
