

KIDS' CONNECTION CHILD INFORMATION FORM:

CHILD(ren)'S FULL NAME(s) First and Last Names	1.	2.	3.	4.
Birthdate				
Grade 2015-16				
Gender				
Allergies				
Last Tetanus Shot				
Home Church				
Religious Preference				
School				
Physician's Name & Phone Number				
Medical Insurance Company & Number				
Emergency Contact Name & Number #1				
Emergency Contact Name & Number #2				
Other Information about your child we should know				
Permission to ride bike or walk home (yes or no)				

Parent /Guardian Information (Please print clearly)

MOTHER'S NAME: _____

FATHER'S NAME: _____

ADDRESS: _____

ADDRESS: _____

HOME PHONE: _____

HOME PHONE: _____

CELL PHONE: _____

CELL PHONE: _____

Text notification: yes or no

Text notification: yes or no

EMAIL: _____

EMAIL: _____

EMPLOYER: _____

EMPLOYER: _____

WORK PHONE: _____

WORK PHONE: _____

STATUS: Married Divorced Separated Single

TURN THIS FORM OVER PLEASE



KIDS' CONNECTION CHILD INFORMATION FORM:

OTHERS AUTHORIZED TO PICK UP CHILD:

NAME: _____ PHONE# _____

NAME: _____ PHONE# _____

NAME: _____ PHONE# _____

Anyone NOT permitted to pick up my child:

My child has special needs that Kids' Connection should be aware of:

Please keep in mind that Kids' Connection volunteers are not trained to handle all special needs. A specialized volunteer will need to be provided by the parent in the case of a child needing special assistance.

I (we) understand that if my child chooses to leave the facility on his/her own against the advisement of the First Reformed Church/Kids' Connection Volunteers or Staff, First Reformed Church/Kid's Connection will not be held responsible once he/she has left the facility property.

Signature of Parent/Guardian _____ Date _____

Signature of Parent/Guardian _____ Date _____

PICTURE RELEASE:

_____ I do

_____ I do not give my consent to let my child _____ be photographed for use by the First Reformed Church/Kid's Connection bulletin boards, craft projects, local newspapers, or other media for the purpose of educational activities, publicity, or advertisements.

Signature of Parent: _____ Date: _____