



Faith
Baptist
-CHURCH-

Faith Kids Registration Form

Child's Name: _____

Address: _____

Date of Birth: _____ Grade Completed: _____

Parents/Guardian Name: _____ Relationship: _____

_____ Relationship: _____

Home Phone #: _____ Cell Phone #: _____

Allergies: Yes No List Allergies: _____

Do you carry an EPI-PEN: Yes No

The safety of your child is our primary concern. Precautions will be taken for their well-being and protection.

I/We the Parents or guardians named below, authorize [program leader] or one of Faith Baptist Church Program Personnel to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/We named below, undertake and agree to indemnify and hold harmless Program Personnel, Faith Baptist Church, and its Leaders from and against any loss, damage or injury suffered by the medical treatment authorized by the supervising individuals representing Faith Baptist Church. This consent and authorization is effective only when participating in or traveling to events sponsored by Faith Baptist Church.

Photos

Please sign below to grant permission for the reasonable use of pictures containing your Child in any or all of the following ways:

Brochures/Promotional material Website Videotaping Church Newsletters

Purposes and Extent

Faith Baptist Church is collecting and retaining this personal information for the purpose of enrolling your Child in our programs, to assign your Child to the appropriate classes, to develop and nurture ongoing relationships with you and your Child, and to inform you of program updates and upcoming opportunities at our organization. This information will be maintained indefinitely as it is a requirement of our insurance company and legal counsel. If you wish Faith Baptist Church to limit the information collected, or to view your Child's information, please contact us.

I have read, understood and agree with the above.

Parent/Guardian Name

Date