

## Elim Lutheran Church – Children’s Ministry Registration Form 2017-2018

---

Please  circle the program(s) you want to register your child(ren) for.

<b>Sundays</b>		<b>Wednesdays</b>
<b>9 a.m.</b> <b>Sunday School</b>	<b>10 a.m.</b> <b>Children’s Church</b>	<b>6:30 p.m.</b> <b>Journey</b>

Parent/Guardian Name(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Landline Mobile (please  one) Text okay? Y/N

Emergency #& Contact Name: \_\_\_\_\_

Child’s Name (First & Last)	Grade	Birthday (MM/DD/YY)	Allergies/Medical

**For Journey we are asking for a \$30 per child (\$75 max per family) donation to help pay for the crafts and supplies used during the year. Scholarships are available.**

**We want each child at Elim to have a Bible. Does your child need a Bible? Y/N**

**Do you give Elim staff permission to use photographs and/or video of my child for advertising, promotion, or other ministry related purposes? Y/N**

**Other individuals authorized to pick up my child from Elim:** \_\_\_\_\_

**Medical Release:** In the event of an emergency, I give Elim staff permission to obtain medical care for my child if I cannot be reasonably reached.

\_\_\_\_\_  
Signature of parent/legal guardian date

<b>Office Use Only:</b>  Entered _____
--