

RCLPC Education Ministry Registration Form

We are excited that your child will be involved in our programs! We would like to ask that you provide the following information so we can ensure that our programs meet the needs of your child.

Date:_____ Child's Name:_____

Date of Birth:_____ Age:_____ Grade:_____ School:_____

Parent's/Caregiver's Name(s):_____

Address:_____

Home Phone:_____ Email:_____

Cell Phone:_____ Student Cell Phone:_____

Number to reach you at while we are with your child:_____

Describe any allergies that we should know about:

Other specific concerns that we need to address:

PERMISSION
To Use Pictures of Youth Activities
In the Newspaper, On the Church's Website, and on Social Media

Occasionally we like to post pictures of the children's classroom activities up on the church's website, have them published in the local newspaper for parents to enjoy, and on social media for the youth and their friends to enjoy. This also gives people outside our church family a chance to see what is going on here at RCLPC. Personal information - such as names, addresses, phone numbers, etc. - will NOT be posted. Please sign below if you agree to allow your child's picture, that has been taken during church youth activities, to be posted up on the website, local newspapers, and/or social media.

Child's Name: _____

_____ Yes, I give my permission for the church to use my child's picture on the website, local newspapers, and/or social media.

_____ No, I do not give permission for the church to use my child's picture on the website, local newspapers, and/or social media.

Signed: _____ Date: _____