



Children's Ministry Registration Form 2015-2016

Complete this form to register infants-6th graders involved in any FBC Clinton, TN Children's Ministry activity, program, or special event. Fill out one form per child. This form may be released to authorized adults caring for children at specific FBC Children's Ministry events. Valid through August 1, 2016.

Child's Name: _____
Last *First*

What regular activities is your child participating in at FBC? Check all that apply.

- Sunday School or Nursery
- KFC Kids for Christ

Please indicate your location on campus while your child is in Sunday School and/or KFC:

Would you be interested in helping in Children's Ministry events or when a teacher has to be absent? If yes, please list your interests:

Child's Birthdate: _____ Child's Grade 2015-2016 School Year: _____
MM/DD/YYYY

Where does your child go to school? _____

Parent or Guardian Information

1. Parent or Guardian's Name: _____
First *Last*

Address: _____

Phone Number: 1. _____ - _____ - _____ 2. _____ - _____ - _____

Email: _____

2. Parent or Guardian's Name: _____
First *Last*

Address: _____

Phone Number: 1. _____ - _____ - _____ 2. _____ - _____ - _____

Email: _____

*Adults authorized to pick-up your child: _____

*Adults may need to show official I.D. at pick-up to verify their identity.

Medical Information

Does your child have allergies? If so, what should we expect? How can we prevent and/or treat reactions if necessary?

Child's Prescription Medications:

Please list any current medical conditions, including asthma:

Physician's Name: _____
First *Last*

Physician's Phone Number: _____ - _____ - _____

Insurance and Emergency Contact Information

Insurance Company's Name: _____

Insurance Company's Address: _____

Insurance Company's Phone Number: _____ - _____ - _____

