



PARENT OR LEGAL GUARDIAN'S CONTACT INFORMATION

| First Name | Last Name |
|----------------|------------------|
| Address | |
| City/State | Zipcode |
| Phone # to rea | ch you at church |
| Email | |
| | |
| Child's Name | Birthdate |
| Child's Name | Birthdate |
| Child's Name | Birthdate |

Are there any medical or behavior concerns we should be aware of? Are there any food or environmental allergies? Any food restrictions? Please list here and also make sure a teacher is notified as well.

At times we take pictures of the children in the classroom for ID purposes and crafts. Is it OK to take pictures of your child/ren?

When children are dismissed, they may **only** be picked up by the person who has registered them or a designated adult over 18 years of age. Please give the full names of any other designated adults.

Is there anyone who may NOT pick up your child/ren?

Signature _____