

Event Parent's Night Out and Children's Party Date 12/1/18

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex M  F   
(Last, First) Age \_\_\_\_\_ Grade (if applicable) \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex M  F   
(Last, First) Age \_\_\_\_\_ Grade (if applicable) \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex M  F   
(Last, First) Age \_\_\_\_\_ Grade (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone(s) \_\_\_\_\_

Email \_\_\_\_\_

Mother/Guardian \_\_\_\_\_, \_\_\_\_\_  
Last First

Father/Guardian \_\_\_\_\_, \_\_\_\_\_  
Last First

The following person is authorized to pick up my child (must show identification):

**Emergency Contact Information**

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_ Contact # \_\_\_\_\_

**Health Information**

Allergies/Medical Condition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

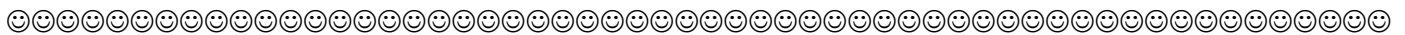


Authorizations (please initial all that apply):

\_\_\_\_\_ I give authorization for my child to have his/her face painted.

\_\_\_\_\_ I give authorization for my child to have his/her picture taken by camera, cell phone, or video.

\_\_\_\_\_ I authorize Pleasant Valley Baptist Church to use any pictures of my child for flyers, newspaper, Facebook, or any other form of advertising events.



The information provided on this form is accurate to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date