

CHILD REGISTRATION FORM



PLEASANT VALLEY BAPTIST CHURCH

Event Parent's Drop & Shop and Children's Party

Date Saturday, December 14, 2019

Child's Name \_\_\_\_\_  
(Last, First)

Date of Birth \_\_\_\_\_ Sex M  F   
Age \_\_\_\_\_ Grade (just completed) \_\_\_\_\_

Child's Name \_\_\_\_\_  
(Last, First)

Date of Birth \_\_\_\_\_ Sex M  F   
Age \_\_\_\_\_ Grade (just completed) \_\_\_\_\_

Child's Name \_\_\_\_\_  
(Last, First)

Date of Birth \_\_\_\_\_ Sex M  F   
Age \_\_\_\_\_ Grade (just completed) \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

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

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

The following persons are authorized to pick up my child (must show identification): \_\_\_\_\_

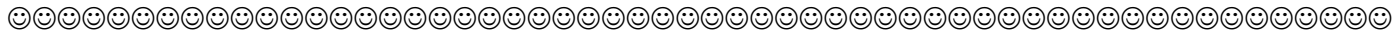
**Emergency Contacts Information**

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

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

Health Information (Allergies/Medical Condition for each child):

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



Authorizations (please initial all that apply):

\_\_\_\_\_ I give permission 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 \_\_\_\_\_

How did you hear about this event? \_\_\_\_\_