



Bristol Federated Church

37 North Street Bristol, Vermont 05443

www.bristolfederatedchurch.org

Sunday School & Nursery 2009-2010

Registration and Medical Permission Form

Thank you for allowing your child(ren) to participate in the Federated Church Sunday School and Nursery program. Every child/youth under the age of 18 must be registered. Please fill out the form completely – including the big ones in Sr. High and the little ones in the Nursery.

1 - Name: _____ Age: _____ Birthday: _____ Grade: _____

2 - Name: _____ Age: _____ Birthday: _____ Grade: _____

3 - Name: _____ Age: _____ Birthday: _____ Grade: _____

(first and last name)

List any allergies (including food allergies), medical, behavioral, or emotional issues that we should be aware of:

Child #1 _____

Child #2 _____

Child #3 _____

Parent/Guardian Name: _____ Phone: _____

Address: _____ E-mail: _____

Parent/Guardian Name: _____ Phone: _____

Address: _____ E-mail: _____

Child(ren) live with: _____

Are there custody issues we should be aware of? _____

Other emergency contact person: _____

Phone: _____ Relationship to child: _____

Who, other than parent or guardian, has permission to pick up child(ren)? ID will be required if we don't know them. Name: _____ Name: _____

1. I give permission for the above child(ren)'s photo to appear (circle one):
 - a. On the Bristol Federated Church website (no names are used): YES / NO
 - b. In local newspapers: YES / NO
 - c. In Methodist/Congregational publications: YES / NO

2. I give permission for a representative of the Bristol Federated Church to administer simple first aid and/or seek emergency treatment for the above child(ren): YES / NO

Signature of Parent or Guardian: _____ Date: _____