

Grace Words Bible Church

Bible Club Registration

Child:

Male/ Female (circle one)

Child's Full Name _____

Home Address _____

City _____ State _____ Zip Code _____

Date of Birth ____/____/____ Age _____ Grade _____

Home Telephone (____) _____ - _____ Cell Phone (____) _____ - _____

Father/Guardian (circle one):

Name _____

Home Address _____

City _____ State _____ Zip Code _____

Work Telephone (____) _____ - _____ Cell Phone (____) _____ - _____

Mother/Guardian (circle one):

Name _____

Home Address _____

City _____ State _____ Zip Code _____

Work Telephone (____) _____ - _____ Cell Phone (____) _____ - _____

Please indicate any disabilities, allergies or other conditions the staff should be aware of (medical, medications, food allergies, etc.):

Emergency Contact:

**This contact should not be the same as the previous information.

Name of Emergency Contact _____

Relationship to Child _____

Home Address _____

City _____ State _____ Zip Code _____

Home Telephone (____) _____ - _____ Cell Phone (____) _____ - _____

Work Phone (____) _____ - _____

Medical Contact:

Name of Primary Physician / Clinic _____

Phone Number of Physician / Clinic (____) _____ - _____

Name of Hospital (if needed) _____

Medical Insurance Company _____

Policy Number _____

Consent and Release Form

As parent or legal guardian of the above named student, I give my permission for this child to attend the Grace Words Bible Church Bible Club Program. I do hereby release and indemnify Grace Words Bible Church of any and all responsibility resulting from injuries with may be obtained by my child in route to or from, or while at the Grace Words Bible Church Bible Club Program.

I hereby give Grace Words Bible Church staff and/or volunteers full permission and authorization to secure emergency medical treatment for my child at the hospital of their choice in the case of emergency. I also authorize the hospital to provide any and all necessary treatment.

I understand the likeness of my child may appear in program activity photographs/ facebook and permit Grace Words Bible Church to use said likeness in any printed materials, online publications, or videos used solely for its non-profit purposes.

I understand Grace Words Bible Church staff and volunteers must have an active role in the discipline of my child while he/she is involved in the Bible Club program. I will support the staff and volunteers in their supervisory efforts.

Parent /Guardian Name (print) _____

Parent/Guardian Signature _____ Date _____