

UMC OF EAGLE VALLEY CHILDREN'S NURSERY REGISTRATION

CHILD'S INFORMATION

First Name	Middle Name	Last Name	
Birth date: / /	Age:	Grade:	Home Phone
Mailing address:		Mom Cell Phone	Dad Cell Phone
Mothers Name		Fathers Name	
E-mail address you would like us to use to contact you:		School Child attends:	
Authorized people to pick up my child (must be 18 years of age or older): (You can specify this change each Sunday if needed)			
Siblings (Names and Ages):			
Is there any custodial information that we should be aware of? If so please list below:			

MEDICAL HISTORY /SPECIAL CONSIDERATIONS

Are there any allergies that we need to be aware of?

Are there any special considerations that we need to be aware of?

Is there anything else that we should be aware of about your child?

**Remember that all children must have an adult on the premises while in our nursery care.
We will be sure to come and get you if there is a problem or emergency during our program.
This program is for ages 3 months to 3-4 years.
Older children should attend our Children's Church Program.**

OTHER INFO

By checking this box I understand that photos of my child may be taken during this activity for display at our church.

I would like to help with the Nursery. I can help by:

Parent Printed Name: _____

Parent Signature: _____