



**Registration Form for Children's Day Out**  
at Covenant Presbyterian Church  
September 3, 2019 – May 15, 2020

\$25 per session due the beginning of each month.  
Please include your \$25 yearly supply fee with this registration form.

Child's Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Day Requested: Monday Tuesday Wednesday Thursday Friday

Second choice: \_\_\_\_\_

Parent(s) or Guardian(s): \_\_\_\_\_

Sibling(s): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (h) \_\_\_\_\_

\_\_\_\_\_ (c) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Parent at work and phone number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Persons Authorized to Pick Up Your Child: \_\_\_\_\_

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Allergies: \_\_\_\_\_

What would you like us to know about your child?

## Emergency Release

I give the staff at Covenant Presbyterian Church my permission to have my child

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transported to \_\_\_\_\_ for emergency medical care,  
or to the nearest available source of assistance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Photo/Image Release

Dear Families,

Each year we take lots of pictures of your wonderful children so that we can share some of their joy and wonder with you and our other families. The children love seeing the pictures of the fun they had.

It is appropriate, in this day and age, that we ask your permission to take their pictures and to post them at the church and maybe on our website. We are asking your permission and will not do so without it. Names of children will never be used, just the images.

If you have any questions or concerns, please speak with Katie Kinnison, Associate Pastor for Spiritual Formation.

Thank you.

## Consent for Use of Information and Persona

I hereby grant to Covenant Presbyterian Church the right to publish, broadcast, webcast, or disseminate in any other form or medium any or all of the following: photographs, video, audio and other images or likenesses of my child for use in news stories, publications, promotional materials, web features and/or any other church purposes.

Name of child or children (print please) \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_