



First Baptist Church of Downers Grove
JUNE 13 - 17 Monday - Friday 9AM - NOON

Incoming 1st through 5th Graders

(Please complete one form per child)

We will be collecting non-perishable food items during the week to donate to Fish Food Pantry. (Suggestion: Kids like to bring in something each day as opposed to several items at once.) We will also be collecting monetary donations to help aid the people of Japan.

Child's Name: _____

Parent's Name: _____

Child's Age: _____ Date of Birth Month _____ Day _____ Year _____

Child's Grade (Fall 2011) _____ Sex _____ Male _____ Female

Child's Address: _____ Town: _____ Zip: _____

Parent/Guardian's Telephone (____) _____ Cell Phone (____) _____

Email: _____

Person to be contacted in case of emergency

(1) Name: _____ Phone: _____ Relationship to Student _____

(2) Name: _____ Phone: _____ Relationship to Student _____

Does your child have any medical condition(s) that we should be aware of? (allergies, medications, etc.) If so, please explain.

Children will be assigned to a group by grade level.

Would you like to volunteer? No. Yes, I would like to volunteer on these days: **M Tu W Th F**

Will you need childcare for ages 0-K? _____ How Many? _____ Ages? _____

Please note: Childcare for ages 0 - Kindergarten is only available to the volunteers on the days that they are volunteering.

The undersigned gives permission to his or her child to participate in the above named activity and releases First Baptist Church of Downers Grove, its officers, employees and agents from any liability whatsoever for any injury or death to person or loss or damage to property sustained by the undersigned for any member of his family, in attendance, and the undersigned agrees to defend and indemnify First Baptist Church of Downers Grove, its officers, employees and agents any liability or loss they might sustain by reason thereof. In the event I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the Director of Children's Ministry to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named above.

Signed: _____ Date: _____

By signing this registration form any photographs taken at or during this event are the property of First Baptist Church of Downers Grove and may be used in future publications as deemed appropriate.



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