FCC Sunday School Registration Form (Nursery – 5th) September 2024-August 2025

Please complete the registration form below and return to Marelu Greco or the church office. A separate registration form is required for youth group (6-12th grade).

	required for youth give	o.b (o == 8.		
Child/ren Information				
Child's Name	Preferred Name	D.O.B.	Grade	
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Parent/Guardian & Contact Information				
Parent/Guardian's Name	2nd Parent/Guardian's Name			
	-			
Phone Number	Phone	Number		
E-mail Address	E-mail Address			
Please check off the phone number(s) and email addres	s(es) you would prefer to re	ceive communic	cations.	
Preferred Mailing Address				
	<u> </u>			
Responsible Adult	Emergency Contact			
Fill out this section only if another adult (such	In case a parent/guardian or Responsible			
as a grandparent) may bring the	Adult is not present or cannot be reached			
children/youth to church or pick them up.	– who should be contacted:			
Name	Name			
Relationship To Child/ren	Relationship To Child/ren			
Phone Number	Phone Number			
Please provide the names of anyone to whom your child CANNOT be released below.				

(Please turn over)

Special Considerations			
Is there anything else we should know in order to create a safe and successful environment for your child? This includes health considerations, allergies, physical limitations, dietary needs, and learning style. Please answer as needed for each child or youth:			
Bathroom Consent			
Children are encouraged to use bathrooms before church begins. However, use of the bathroom may be needed during Sunday School times. If your child needs to use the bathroom during Sunday School time, please let us know how you would prefer staff and volunteers to proceed. □ Please text me so I can meet my child (accompanied by a volunteer) at the 2 nd floor bathroom and assist them. □ A volunteer may accompany my child to the 2 nd floor bathroom, where my child can use the toilet independently.			
Media Release			
On occasion, pictures may be taken or video filmed during church activities. These photos may be shared with the congregation and/or the wider community. To comply with your wishes, we ask you to fill out the following. □ I give permission for my youth's picture to be used in church publications. □ I DO NOT give permission for my youth's picture to be used in the following church publications. Please check all that you wish to exclude: □ Highlights Newsletter/Midweek Email □ FCC Website □ FCC Social Media □ Children's Ministry Brochure			
Parent/Guardian Consent			
I agree and consent to allow my child to participate in children's ministry and Sunday School activities at First Congregational Church of Walla Walla. I give permission to authorize emergency medical treatment until such time as I can be contacted. I understand that a signed note of permission will be required for each event off church grounds or overnight events. Parent/Guardian Signature Date			
Tarcity Guardian Signature Date			