

**2011 - 2012**  
**Christian Education/Music Registration Form for Children**  
**ages 3-5<sup>th</sup> grade**

Parents' Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

First Child's Name: \_\_\_\_\_

Birth day \_\_\_/\_\_\_/\_\_\_      Grade in school \_\_\_\_\_      Name of School \_\_\_\_\_

Cherubs (K-1): Yes    No      Choristers (2<sup>nd</sup>-5<sup>th</sup>): Yes    No

Baptized?    Yes      No

Who will pick up this child from Sunday School or Music?  
\_\_\_\_\_

Are there any medical concerns we should be aware of? (Allergies, medications, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Second Child's Name: \_\_\_\_\_

Birth day \_\_\_/\_\_\_/\_\_\_      Grade in school \_\_\_\_\_      Name of School \_\_\_\_\_

Cherubs (K-1): Yes    No      Choristers(2<sup>nd</sup>-5<sup>th</sup>): Yes      No

Baptized?    Yes    No

Who will pick up this child from Sunday School or Music?  
\_\_\_\_\_

Are there any medical concerns we should be aware of? (Allergies, medications, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Third Child's Name: \_\_\_\_\_

Birth day \_\_\_/\_\_\_/\_\_\_      Grade in school \_\_\_\_\_      Name of School \_\_\_\_\_

Cherubs (K-1): Yes    No      Choristers (2<sup>nd</sup>-5<sup>th</sup>): Yes      No

Baptized?    Yes    No

Who will pick up this child from Sunday School or Music? \_\_\_\_\_

Are there any medical concerns we should be aware of? (Allergies, medications, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Please see back of form for Picture Release

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**PICTURE RELEASE FORM**

**I grant permission for pictures to be taken of the above named child/children while in Christian Formation Class, Cherubs, Choristers or other Christ Church activities.**

**Name of Parent (print)** \_\_\_\_\_

**Date** \_\_\_\_\_

**Signed** \_\_\_\_\_  
**(Parent or Guardian)**