

Kids4Truth Registration Form 2011-2012

Grades K-5

Wednesdays 6:45-8:15

Child Information (one form per child)

Name: _____ Date of Birth: ____/____/____

Parent/Guardian Name(s): _____

Address: _____
(Street) (City) (State) (Zip)

Home Phone: (____)____-____ Grade: _____

E-mail Address (*print clearly*) _____

Do you check your e-mail regularly? YES/NO

IMPORTANT: Does your child have **allergies** or **medical conditions** the staff should know about? YES / NO

If yes, please specify, and list **medications and dosage**:

Emergency Contact Information

Contact Person #1: _____ Contact Person #2: _____

Relation to child: _____ Relation to child: _____

Home Phone: (____)____-____ Home Phone: (____)____-____

Alt. Phone: (____)____-____ Alt. Phone: (____)____-____

Permission to Transport

In the event of a medical emergency, we will call 911 for Emergency Services, including transport to the nearest hospital/clinic. Please provide the following information and sign below to authorize emergency transport.

Child's Insurance Provider: _____ Policy #: _____

Signature of Parent or Guardian

Date

(over)

Authority to Pick-Up/Dismiss

The following individuals are authorized to pick-up my child from WSCC.

- | | |
|-------------------------------|---------------------------------|
| 1. _____
(Mother/Guardian) | 3. _____
(Name/Relationship) |
| 2. _____
(Father/Guardian) | 4. _____
(Name/Relationship) |

Student Photographs

Photographs of students engaged in program activities may be taken and used for publicity purposes. Signature below provides consent.

Parental Consent

I consent that my child, [name] _____, is allowed to participate in West Suburban Community Church's Kids4Truth program.

Signature of Parent or Guardian

Date

Kids4Truth Book Fees: *(include payment with registration form)*

K - Gr 1 \$5
Gr 2-5 \$18

Need-based scholarships for books are available. Please inquire.

How did you hear about Kids4Truth?

- | | |
|---|--|
| <input type="checkbox"/> Friend/neighbor | <input type="checkbox"/> Attended Summer Kids Klub |
| <input type="checkbox"/> Postcard/mailing | <input type="checkbox"/> Regular WSCC attendee |

Please return completed form, with payment for student book (*checks payable to West Suburban Community Church*), to the address below, by August 24.

West Suburban Community Church
825 N. Van Auken, Elmhurst, IL 60126
630/530.5018 / www.westsub.net