

BBC KIDS 2018/19 REGISTRATION FORM

ALL INFORMATION MUST BE COMPLETED BEFORE YOUR CHILD WILL BE CONSIDERED REGISTERED.

MINISTRIES REGISTERING FOR: *Please check all that apply*

- Sunday Kids Worship services (JK—Grade 5) Sunday Preschool/Nursery (newborn - 3+)
- Zone Out (midweek) (age 2 by Dec. 2018—grade 5) Special Event _____

First Name: _____ Last Name: _____ Male Female

Birth Date: ____/____/____ Age: ____ Grade: ____ Contact email: _____
M D Y

Phone Numbers for contact and sign-in: #1: _____ #2: _____

Child's Address: _____
Street City Postal Code

Mother/Guardian: _____ Father/Guardian: _____
Name Name

ADDITIONAL INFORMATION

Does your child have any allergies/medical conditions or physical, emotional, mental, behavioural concerns, or limitations that our volunteers should be aware of? Yes No If yes, please provide details:

Are there any restraining orders or custody situations we should be aware of? Yes No
If yes, please provide details:

In the event I cannot be reached in an emergency, I/We the parents or guardians named above hereby give my permission to the medical personnel selected by the Bramalea Baptist Ministry staff to secure emergency medical treatment including but not limited to, first aid, CPR, admission to any hospital, tests, surgery or general anaesthesia.

I/We, named above, undertake and agree to indemnify and hold blameless Bramalea Baptist Church, its Pastors and Board of Directors from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of Bramalea Baptist Church. This consent and authorization is effective only when participating in or traveling to/from events of the Bramalea Baptist Church.

I/ We understand that electronic devices are not allowed during programs. However pictures may be taken at designated times and events by participants. Photos or videos taken for church purpose/ promotion will never be published with names (unless parental permission is obtained)

I/ We understand that the information being collected may be used for mail and electronic communication purposes ONLY by Bramalea Baptist Church. Information will never be given to a third-party.

I have provided true and accurate information, and by signing below, I accept all the above terms and agreements.

Parent Signature: _____ Date: _____

Purpose and Extent

Bramalea Baptist Church is collecting and retaining this personal information for the purpose of enrolling your child in our programs, to assign the student to the appropriate classes, to develop and nurture on going relationships with you and your child, and to inform you of program updates and upcoming opportunities at our Church. This information will be maintained indefinitely as it is a requirement of our insurance company and legal counsel. If you wish Bramalea Baptist Church to limit the information collected, or to view your child's information, please contact us.

Office: Planning Centre Google Drive Master