

Child	Registration	Form
1	Date	

Parent/Guardian:			Home phone:		_ Cell phon	e:	_
Street Address:			Email addre	ss:			_
City:	State:	Zip:		(primary a	address for receiving info	ormation for the family)	
Additional Emergency Co	ntact:			Phone:			_
Any person NOT authorize	ed to pick up my child(ren):	_	That person's relatio	nship to child	(ren):		
Photo Consent:							
I understand that picture other promotional materi	s, video recordings, and audio ials.	recordings o	of my child(ren) may be	made for use	on Riverstone (Church's website o	r
emer premenental maner.		n:	YESNO (PLI	EASE INITIA	AL)		
reverse side of this doc							the
Signature:	(parent/guardian of above named	child(ren)	Da	te:			
Child's First Name:	Child's Last Name):	Birthdate:	Age:	Grade:	Gender:	
I am registering my child	for Sunday Ministries:						
	Nursery		KidsWorship _				
	(0 – 3 years)		age 3 (and fully potty-trained) through 6th grade				
Allergies/Special Needs:							
				_			
Child's First Name:	Child's Last Name	: :	Birthdate:	Age:	Grade:	Gender:	
I am registering my child	•						
	Nursery		KidsWorship _				
	(0 – 3 years)		age 3 (and fully p	otty-trained) thr	ough 6 th grade		
Allergies/Special Needs:							

ADDITIONAL SPACE FOR MULTIPLE CHILDREN PROVIDED ON THE REVERSE SIDE

Child's First Name:	Child's Last Name:	Birthdate: Age:	Grade:	Gender:	
I am registering my child fo	r Sunday Ministries:				
	Nursery	KidsWorship			
(0 – 3 years) Allergies/Special Needs:		age 3 (and fully potty-trained) through 6th grade			
7 mo. g.co/ opocial 1100ac.					
Child's First Name:	Child's Last Name:	Birthdate: Age	: Grade:	Gender:	
I am registering my child fo	r Sunday Ministries:				
	Nursery KidsWorship				
Allergies/Special Needs:	(0 – 3 years)	age 3 (and fully potty-trained) through 6th grade			
Anergics/opeoidi Needs.					
	21.00	5 1.0.1.1			
Child's First Name:	Child's Last Name:	Birthdate: Age:	Grade:	Gender:	
Child's First Name: I am registering my child fo		Birthdate: Age:	Grade:	Gender:	
		Birthdate: Age: KidsWorship	Grade:	Gender:	
I am registering my child fo	r Sunday Ministries:	·		Gender:	
	r Sunday Ministries: Nursery	KidsWorship		Gender:	
I am registering my child fo Allergies/Special Needs:	r Sunday Ministries: Nursery (0 – 3 years)	KidsWorshipage 3 (and fully potty-traine	ed) through 6 th grade		
I am registering my child fo	r Sunday Ministries: Nursery	KidsWorship		Gender:	
I am registering my child fo Allergies/Special Needs:	r Sunday Ministries: Nursery (0 - 3 years) Child's Last Name:	KidsWorshipage 3 (and fully potty-traine	ed) through 6 th grade		
I am registering my child fo Allergies/Special Needs: Child's First Name:	r Sunday Ministries: Nursery (0 - 3 years) Child's Last Name:	KidsWorshipage 3 (and fully potty-traine	ed) through 6 th grade		
I am registering my child fo Allergies/Special Needs: Child's First Name: I am registering my child fo	r Sunday Ministries: Nursery (0 - 3 years) Child's Last Name: r Sunday Ministries:	KidsWorshipage 3 (and fully potty-trained	ed) through 6 th grade Grade:		
I am registering my child fo Allergies/Special Needs: Child's First Name:	r Sunday Ministries: Nursery (0 - 3 years) Child's Last Name: r Sunday Ministries: Nursery	KidsWorship age 3 (and fully potty-trained) Birthdate: Age: KidsWorship	ed) through 6 th grade Grade:		

Release Statement (please sign on reverse page to acknowledge having read)

- By signing below, I, the parent/guardian of the below named minor child(ren), acknowledge and accept the risk of possible physical injury while my minor child(ren) is in the care of Riverstone Church.
- Further, to the fullest extent permitted by law, I release Riverstone Church, any and all of its representatives, from any injury, harm, damage, or death which may occur to my minor child(ren) while participating in the activities. I agree to save and hold harmless Riverstone Church, any and all of its representatives, from any claims arising out of my minor child's(ren's) participation in the activities.
- I, the parent/guardian, accept personal financial responsibility for any bodily or personal injury sustained during the time the child is in the care of Riverstone Church.
- If a dispute over this agreement or any claim for damages arises, I, the parent/guardian, agree to resolve the matter through a mutually acceptable arbitration process.
- In the event I cannot be reached in an emergency, I, the parent/guardian, give permission to a representative of Riverstone Church to act on my behalf in the best interest of my child(ren) and to make the decisions necessary for treatment.
- Should there be no Riverstone Church representative available, I give permission to the attending physician to treat my minor child(ren).
- As a parent or legal guardian, I understand that I am responsible for the healthcare decisions of my minor child(ren) and agree that my insurance plan is the primary plan to pay for the medical, dental, or hospital care or treatment that is given to my minor child(ren).
- Any insurance policy of the church or organization sponsoring this event will be used as the secondary coverage.

