

Family Life Center
Child's Activity Registration Form

Print this form, complete it, and mail it, with payment, to Family Life Center, 801 Star Street, Bonham, TX 75418

Please Print Clearly

Activity desired: **Kids in the Kitchen**

Program Start Date: **August 1-12, 2011**

Registration Deadline: **July 25, 2011**

Cost of Activity: **\$30** Method of Payment enclosed (circle one) check cash money order

Child's Name _____ Male or Female (circle one) Grade _____

Address _____ T-shirt Sz _____

Parent(s) Name(s) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email _____

Emergency Phone and Contact Name _____

Please list any medical information, such as allergies, asthma, or any medication that is being taken: _____

Please list primary care physician and phone number:

I hereby release the First United Methodist Church/Family Life Center, their agents, employees, or volunteers on behalf of myself and/or my beneficiaries and/or representatives, from any and all liability for any accident while participating in the above listed activity, including practices. I hereby release any employee, agent, or volunteer of the First United Methodist Church/Family Life Center from any and all liability if required to administer first aid or obtain medical care from any licensed physician or medical clinic for the participant named above when time is of the essence. I also grant the First United Methodist Church/Family Life Center permission to use my name or my images for promotional efforts including, but not limited to, print and internet advertising, newsletters, brochures, art projects, and portfolio content. By signing, I waive any claim based on a right of publicity, right of privacy or any similar basis resulting from such use. I also agree that the photographs/videos shall remain in the possession of the First United Methodist Church/Family Life Center with the full right of disposition in any manner whatsoever.

Parent/Guardian Signature _____ Date _____

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Payment MUST accompany form.