



**Faith Kids**

# **ADVENTURE CLUB**

## **REGISTRATION & MEDICAL RELEASE FORM 2018-2019**

Thank you for your interest in having your child(ren) attend Adventure Club, where children aged 3 years old (must be potty-trained) through 5th grade learn about Jesus and the Bible in a fun, age-appropriate way. Adventure Club meets throughout the school year on Wednesday nights from 6:00-7:30 p.m. in the Preschool Building on Faith UMC's campus.

This year, the children will be learning songs that they will be invited to present to the congregation on: Sept. 30, Oct. 28, Feb. 24, Apr. 14, and May 19 (The presentations will occur during the 10:30 am service time). There will also be a Christmas Pageant they can participate in, which will be presented to the congregation on Dec. 16, both services- 8:30 & 10:30 a.m. (Participation in singing and being part of the Pageant are optional.)

### **PLEASE SELECT THE SESSION(S) FOR WHICH YOU ARE SIGNING UP:**

You may opt to sign up for just one, or both:

**SESSION ONE**

AUGUST 29, 2018 TO DECEMBER 12, 2018

FEE: \$30/CHILD\*

(\*FEES WAIVED FOR CHILDREN OF OUR VOLUNTEERS.)

**SESSION TWO**

JANUARY 23, 2019 TO MAY 8, 2019

FEE: \$30/CHILD\*

Please complete this Registration/Medical Release form and submit it, along with your check (made payable to Faith UMC), to Brenda Wood, the Children's Ministry Director.

- You can mail it to the church, or drop it off during church office hours (9 am – 2 pm during the school year, and 9 am – 12 pm during the summer) at 6340 W. Boynton Beach Blvd., Boynton Beach, FL 33437.
- You may also scan & email the form to Brenda at [FaithKids@gofaithunited.org](mailto:FaithKids@gofaithunited.org), and deliver your payment at the beginning of the Adventure Club meeting.

### **VOLUNTEER INFORMATION**

Our program's success depends on our volunteers! If you are interested in helping out (behind the scenes or center stage), please check the box below, and I will contact you to begin the volunteer process. (Volunteers working directly with children are required to obtain a background check, paid for by the church.)

**Yes! I'm interested in learning more about volunteering!**

**Please complete Parent/Guardian's Information Below:**

	Parent/Guardian #1	Parent/Guardian #2
Name		
Cell Phone		
Home Phone		
Work Phone		
Email		
Address: _____		
City: _____ State: _____ Zip: _____		

Contact me with any questions! Brenda Wood 561-779-7509 or [FaithKids@gofaithunited.org](mailto:FaithKids@gofaithunited.org)

## MEDICAL RELEASE FORM

**Please complete information on each child who will be attending Adventure Club:**

Primary Parent/Guardian's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

	Name	Date of Birth	Allergies/Medical Restrictions?
Child 1			
	Circle: Male Female	Grade:	
Child 2			
	Circle: Male Female	Grade:	
Child 3			
	Circle: Male Female	Grade:	

Emergency Contacts (MUST list two):

	Name	Relationship	Phone Number
Contact 1			
Contact 2			

**PLEASE READ THE FOLLOWING STATEMENTS AND SIGN BELOW, INDICATING YOUR ACCEPTANCE AND ACKNOWLEDGEMENT:**

I, \_\_\_\_\_, the legal parent or guardian of: \_\_\_\_\_

- DO give permission for Faith United Methodist Church/Representative to render or seek medical care for my child(ren) in the event of an emergency where such care is required.
- DO recognize that participation in this program is voluntary and at the participant's own risk; therefore, I release Faith United Methodist Church, its pastors, staff and volunteers from liability for injuries sustained by my child, not due to willful or malicious neglect.

The following is optional; check only if you are giving your permission:

- DO give permission for Faith United Methodist Church to use photographs that may include my child(ren) for the purpose of publicity and web content.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_