

St. Andrew Lutheran Church
Children's Ministries

Registration

In an effort to update our church database, we request that you fill out this form completely. Please print neatly. We want to make sure our records are current and accurate. Thank you! J

Child's Name _____ Age _____
Date of Birth _____ Sex: M _____ F: _____
Grade _____ Graduation Year _____ T-shirt size _____
Home Phone # _____ Work Phone # _____ Cell # Phone _____
The best times/ ways to reach me: _____
Email Address: _____ Child's Email Address: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Parent(s)/ Guardian(s) Name(s) _____
Occupation of Parent/ Guardian(s): _____
Parent/Guardian: ___ is a Member ___ Attends here Person bring & picking up child _____
Relationship to child _____

Child will attend: **Please circle all that apply** *Sunday school* 10:00 (3years old-Elementary school) , *Kids Klub* (first Tuesday of month 4:30-7:30 Elementary and Middle School) , *Youth Group* (Middle and High School), *Confirmation* (Middle and High School)

I will support my child and Children's Ministries by praying for them and:

___ **Help** as a Shepherd (Assist in Sunday school) or (Assist in Kids Klub)
___ **Teach** ___ 3-5 year olds ___ K-2nd ___ 3rd -5th **in** ___ Sunday School or ___ Kids Klub
___ **Special Events Party Planner** to create and organize fun, safe events
___ **Coordinate** Sunday School or Kids Klub
___ **Make** follow up calls, help with mailings, or organize supplies
___ **Help in any way you need me!**

My previous experiences with children include _____

For the safety of our children, do you know CPR? _____ First Aid? _____

I will help my child practice putting their faith into action; learn good stewardship, and giving back to God with a cheerful heart by:

___ Bringing my child on a regular basis.
___ Giving my child responsibilities at home that help the family.
___ Showing my child how to help someone else or letting them help.
___ Modeling a giving heart myself through my offering & sharing ministry.
___ Encouraging my child to bring an offering to Sunday School/ Church each week.

P.S. _____ I need Offering Envelopes for my child.

___ Encouraging my child to share his/her God given gifts in a ministry or for getting involved in a ministry together as a family.

Attached is my donation of \$ _____ to help the programs as needed.

My Childs Information:

Things I'd like you to know about my child:

Learning, behavioral, or medical needs: _____

Recommendations: _____

Know Allergies to food/ Medications: _____

Reccommendations: _____

Authorization:

I hereby give permission for _____ to participate in all activities of St. Andrew Children's Ministries. In the event of an emergency, know that every effort will be made to contact a Parent/ Guardian immediately. I authorize St. Andrew Lutheran church to administer first aid or medical treatment necessary and release them form any and all responsibility in connection therewith. I understand that this includes off site/ fields trips also. I understand my photo or my child's photo may be taken for use in the Children's Ministry promotional literature, webpage, art project, or kid's bulletin board. I waive the right to inspect or pre-approve the photo if used for such purposes. **I will support or assist in any way that I am able.**

Signature _____

Printed Name _____ Relationship _____

Today's Date _____

Thank you for sharing God's love by making a positive difference in a child's life!

Please return this completed registration or mail to:

St. Andrew Lutheran Church
Children's Ministries
% De Ann Bauman
8901 Del Webb Blvd.
Las Vegas, NV 89134-8686