Christ Presbyterian Church
knowing Christ and making Him known

2025 - 26 CPC Children & Youth Programs Enrollment Form

Thank you for enrolling your child/youth in Christ Presbyterian Church's (CPC) Children and Youth Programs. All programs offered at CPC are designed to teach a comprehensive biblical world view, through age-specific curriculum. We are trusting God to reveal Himself through His Word and to raise up a generation of children that know Christ and make Him known!

CHILD/YOUTH INFORMATION

Child/Youth's Full Name: _____

Academic School Grade (2025-2026): _____ School Name: _____

Birth Date (mm/dd/yyyy): _____ Age: _____ Gender (M/F)

PARENT/GUARDIAN INFORMATION

Father's Full Name: _____

Phone(s): _____ Email(s): _____

Mother's Full Name: _____

Phone(s): _____ Email(s): _____

Guardian's Full Name: _____

Phone(s): _____ Email(s): _____

HOME INFORMATION

Street: _____

City: _____ State: _____ Zip Code: _____

EMERGENCY CONTACT (other than Parent or Guardian)

Full Name: _____ Phone: _____

MEDICAL INFORMATION

Does your child/youth have any Special Medical Condition(s) or Allergies that we should know (including any foods or food ingredients)?

_____

_____

_____

INFORMATION on SPECIAL LEARNING NEEDS

Does your child/youth have any special learning needs that we should know?

_____

_____

_____

Signed: _____ Date: _____

(Parent or Guardian)

MEDICAL RELEASE

Parent's Name: _____ **Home Phone #:** _____

Cell Phone #: _____ **Email Address:** _____

Emergency Contact Person: _____ **Phone # :** _____

Doctor's Name: _____ **Doctor's Phone #:** _____

I understand that, in the event medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give permission to the adults in charge of ***CPC Children & Youth Programs*** to secure the services of a licensed physician to provide the care necessary for my child/youth's well-being.

I, the parent or legal guardian of the child/youth listed above, also release Christ Presbyterian Church and any adults in charge from any and all claims resulting from injury or damage that may be sustained by my child/youth while participating in ***CPC Children & Youth Programs***.

Signed: _____ Date: _____

(Parent or Guardian)

PHOTO/TECH PARTICIPATION RELEASE

CPC Children & Youth Programs are offered through a variety of memorable activities, which are sometimes recorded (through video-tape, photography, audio-taped interviews, and/or other electronic/digital means).

We often utilize these collected sounds, and images, at times when the memories are valuable motivators, such as during CPC Children & Youth Programs training or promotion.

Names are not purposely displayed unless those being photographed and/or videotaped are wearing identifying tags or clothing.

Please mark the applicable line below in regard to your willingness to allow your student to be photographed, recorded, video, and/or audio taped.

_____ I hereby give my consent for my child/youth to be included in any pictures, video/audio recordings, or other electronic means. I also give my consent for my child/youth's image, likeness, or voice, to be used in promotional materials and on the Church website, Facebook, and VIMEO.

_____ I hereby request that my child/youth **NOT** be photographed, videotaped, or interviewed for possible use in video/audio recordings or use on promotional materials, and on the Church website, Facebook, and VIMEO.

Signed:_____ Date:_____

(Parent or Guardian)

Please place completed Registration Forms at the Children's Bulletin Table in the Church Foyer or return to Assistant Pastor of Youth and Families. Thank you.

***Registration of any additional child(ren)/youth in a household must be done on a new registration form.*