

For kids entering
Kindergarten
through 5th Grade
To Know, Love and
Serve Jesus Christ



NPC New
Promise
Church
8671 Euclid-Chardon Rd
Kirtland, OH
(440) 256-3705

Child(ren) Registration

Name(s):	Birthday:	T-shirt Size
		XS(4T), SM(5/6), MED(7/8), LG(10/12), XL(14/16)

Parent Contact Information:

Mothers Name & Cell: _____ (____) _____

Father's Name & Cell: _____ (____) _____

Home Address: _____

E-mail Address: _____

Church You Attend: _____

Person's Authorized to Pick Up Your Child _____

Special Circumstances (Pick-Up, Allergies, etc.): _____

Photo Release: I authorize my child(ren) to be photographed for advertisement for Kids4Christ at NPC.

----- Date: -----
Guardian's Name

Medical Release: In consideration for my child(ren) -----
being allowed to participate in the Kids4Christ, on behalf of my child, my spouse and myself, I hereby assume all risks in connection with the Kids4Christ and I further release New Promise Church, the Pastoral Staff or Teachers thereof from all claims, judgments, liability for any damage that the child or his/her estate, myself or my spouse ever had, now has or may have due to the child's participation in the Kids4Christ including all risks connected therewith whatever foreseen or unforeseen. I fully understand that I have the opportunity to call the church and/or Leader and has him/her about Kids4Christ.

Emergency Contact: -----

Phone Number: ----- Relationship: -----

Health Insurance Co: ----- Policy/Group # -----

Parent/Legal Guardian Signature -----

Date:-----

\$15 per kid x ____ kids. =. -----

- *A Parent or Guardian must be onsite at all times while your child is in Kids4Christ.
- **Payment Plans: We want every child to attend. Please let us know of financial difficulties and we can set up a payment plan. The registration fee helps to cover the cost of awards, crafts, books & shirts.
- ***Please make checks payable to New Promise Church

For Office Use:	<input type="checkbox"/> Paid in Full <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	Date Received _____
	<input type="checkbox"/> Approved _____	Amount Paid _____