

# Kid's Club XL



Covenant Presbyterian Church  
6695 Mae Anne Avenue, Reno NV 89523  
(775)746-8118 [www.covenant-reno.org](http://www.covenant-reno.org)



## After School Program Registration Form 2018 Fall Semester

Wednesday Afternoons from 1:30 - 5:30 pm

Registration fee: \$25 Per Middle School Student

### Student Information

Student's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Grade in School: \_\_\_\_\_

Gender: \_\_\_\_\_ School attending: \_\_\_\_\_ Church attending: \_\_\_\_\_

### Medical Information

Allergies, Special Needs, Health Concerns:

---

---

### Parent/Guardian Information

Mother/guardian's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Father/guardian's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Additional adults authorized to sign out my student:

Name	Relationship	Phone Number

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

**PLEASE TURNOVER AND COMPLETE BACK OF REGISTRATION FORM**

**Communications Release**

Throughout the year, we may send you important Ministry information, such as schedule changes, special events, and program updates. May we send this information to an e-mail address?

**No Yes Email Address:** \_\_\_\_\_

**Medical Treatment Release**

In the event that medical treatment is needed for your student, every effort will be made to contact a parent. If this is not possible, do you give permission to the ministry staff to secure any necessary medical treatment for your student?

The undersigned shall be liable and agree to pay all costs and expenses incurred in connection with such medical or dental services rendered to the aforementioned student pursuant to this authorization. The undersigned also hereby gives permission for my student to ride in any vehicle designated by employees/agents of Covenant Presbyterian Church while attending and participating in church sponsored events.

**No Yes (signature needed)** \_\_\_\_\_

**Photo/Video Release**

I hereby grant Covenant Presbyterian Church and its employees/agents permission to capture and publish photos and video of my student in any or all of its publications including electronic media for the promotion of Covenant Presbyterian Church programs.

**No Yes (signature needed)** \_\_\_\_\_

**School-Church Connections**

**Please initial to verify that you will contact the church when your student is absent from school**

For the safety of your student, we need to be notified if your student is not in attendance at school on a Wednesday and will not be needing afterschool pick up. Please contact the church before 2:00 so we know that we will not be waiting for your student afterschool that day.

**Please initial here if you would like your student to spend about 20 minutes each Wednesday on homework and/or reading. We will provide a quiet place for them to work.**

**How did you hear about Kid's Club?**

- Church Announcement
- Friend or Relative
- Website
- Social Media (i.e. FaceBook)
- Flyer from School
- Other \_\_\_\_\_