



FIRST BAPTIST CHURCH
WASHINGTON MI
— EST. 1940 —

Children's Ministry Participation Form

PARENT INFORMATION

Note: those registered as parents/guardians will be eligible to check the registered children in or out of children's ministry.

Parent/Guardian #1

Name: _____
Mobile Phone: _____
Email: _____
Current Address: _____
City: _____ **State:** _____ **Zip:** _____
Gender: _____ Male _____ Female **Relationship to Registered Child(ren):** _____
Marital Status: _____ Single _____ Married _____ Divorced _____ Separated _____ Widowed
Would you like a Key Tag? _____ Yes _____ No

Parent/Guardian #2

Name: _____
Mobile Phone: _____
Email: _____
Current Address: _____
City: _____ **State:** _____ **Zip:** _____
Gender: _____ Male _____ Female **Relationship to Registered Child(ren):** _____
Marital Status: _____ Single _____ Married _____ Divorced _____ Separated _____ Widowed
Would you like a Key Tag? _____ Yes _____ No

CHILD INFORMATION

Child #1

Name: _____ **Gender:** _____ Male _____ Female
Birth Date: _____ **Grade in School:** _____
Special Instructions (Allergies, etc.): _____

Child #2

Name: _____ **Gender:** _____ Male _____ Female
Birth Date: _____ **Grade in School:** _____
Special Instructions (Allergies, etc.): _____

Child #3

Name: _____ **Gender:** _____ Male _____ Female
Birth Date: _____ **Grade in School:** _____
Special Instructions (Allergies, etc.): _____

Child #4

Name: _____ **Gender:** _____ Male _____ Female
Birth Date: _____ **Grade in School:** _____
Special Instructions (Allergies, etc.): _____

Mandatory Parent/Guardian Agreement & Release

I, as a parent/guardian of the registered child(ren), grant permission for my child(ren) to participate in the various children's ministry activities offered by First Baptist Church. I represent to First Baptist Church that the child is physically and mentally able to participate in those activities.

I, as a parent/guardian, understand that this activity, as in any activity for children, does present the risk of injury to the child(ren). I represent to First Baptist Church that I and the child(ren) assume the risk of any such injury and hold First Baptist Church, its agents, employees, and representatives harmless from any liability to any other person or entity arising as a result of the conduct of the child(ren) in this activity including any church provided transportation.

If I, as a parent/guardian, am not personally present at these activities in which the child(ren) is to participate, First Baptist Church is authorized on our behalf to arrange for such medical and hospital treatment as may be deemed advisable for the health and well-being of the child(ren) until such time I, the parent/guardian, can assume these responsibilities. I understand that First Baptist Church & its agents, employees will make reasonable efforts to contact parents as soon as possible.

I agree to the above waiver:

Signature of Parent/Guardian

Date

Mandatory Photo/Video Agreement

First Baptist Church may occasionally take photos/videos during children's ministries during the year.

I grant permission to allow these photos/videos to be used for the promotion of children's ministries at First Baptist Church. I understand that these photos/videos may be utilized for slide shows, presentations, the church website, social media, etc. I understand that First Baptist Church and its staff/agents will not tag or identify any children by name.

I agree to the above waiver:

Signature of Parent/Guardian

Date