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**FIRST CONGREGATIONAL  
CHURCH**  
OF CRYSTAL LAKE

# STUDENT REGISTRATION FORM | 2022-2023

**Family Name:** \_\_\_\_\_ **Primary phone #** \_\_\_\_\_

**Primary Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_

**Primary E-mail:** \_\_\_\_\_

**Worship Service Usually Attended:** 9:00am \_\_\_\_ 11:00am \_\_\_\_ Varies \_\_\_\_ **Church Member:** Yes \_\_\_\_ No \_\_\_\_

<u>Parent/Guardian 1 Information</u>	<u>Parent/Guardian 2 Information</u>
Name _____	Name _____
Address _____ _____	Address _____ _____
Phone Numbers: Cell: _____	Phone Numbers: Cell: _____
Work: _____	Work: _____
E-mail: _____	E-mail: _____

## Student Information:

Name	Birth Date	Grade	*Allergies/Other Concerns	Personal Gender Pronouns
1. _____	_____	_____	_____	_____
List activities this student will participate in:				
Student Email: _____			Student Cell: _____	
2. _____	_____	_____	_____	_____
List activities this student will participate in:				
Student Email: _____			Student Cell: _____	
3. _____	_____	_____	_____	_____
List activities this student will participate in:				
Student Email: _____			Student Cell: _____	
4. _____	_____	_____	_____	_____
List activities this student will participate in:				
Student Email: _____			Student Cell: _____	

*\* We ask that you please fill out an Allergy form*

We have **Buddies** (a one on one adult volunteer) available for any child who needs extra support.

Yes, we would like more information: \_\_\_\_\_

<u>Children's Ministries</u>	<u>Youth Ministries</u>	<u>Choirs</u>
Nursery (Birth – Age 3) Sunday School (Age 3 – 5 <sup>th</sup> ) Faith Explorers (4 <sup>th</sup> & 5 <sup>th</sup> grade)	Confirmation (7 <sup>th</sup> & 8 <sup>th</sup> grade) Junior Fellowship (6 <sup>th</sup> – 8 <sup>th</sup> ) Pilgrim Fellowship (9 <sup>th</sup> – 12 <sup>th</sup> ) <i>Our Whole Lives (7<sup>th</sup> – 9<sup>th</sup>)</i> <i>OWL offered 2023-2024</i>	Family Music Thursdays (Birth – 6 w/ caregiver) Melody Makers (Age K – 2 <sup>nd</sup> grade) Carol & Chancel Choir (3 <sup>rd</sup> – 8 <sup>th</sup> grade) Alleluia Sound (9 <sup>th</sup> – 12 <sup>th</sup> grade) Good Vibrations (9 <sup>th</sup> – 12 <sup>th</sup> grade)

*A program registration or activity fee may apply for various programs or choirs.*

**OVER**

**PERMISSION AND MEDICAL RELEASE**

Fill out Insurance information only for youth in 6<sup>th</sup> – 12<sup>th</sup> grade – participating in JF, PF, Alleluia Sound and Good Vibrations

Youth(s) Name \_\_\_\_\_

**INSURANCE INFORMATION:**

Provider \_\_\_\_\_ Group # \_\_\_\_\_

Name of Insured \_\_\_\_\_ ID # \_\_\_\_\_

**ADDITIONAL EMERGENCY CONTACT INFORMATION if a parent cannot be reached:**

*In the event of an emergency, we will make every attempt to contact a parent. Please provide names of two people to contact **if a parent cannot be reached**. (Be sure to list the names of people who usually know your whereabouts.)*

<b>Contact #1</b> _____ Relation to student _____ Cell phone _____	<b>Contact #2</b> _____ Relation to student _____ Cell phone _____
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**PARENT RELEASES**

**1. Medical Treatment:** *As a parent and/or guardian, of the minor(s) listed on this form, I do herewith authorize the treatment by a qualified and licensed medical physician in the event of an emergency which, in the opinion of the attending physician, may endanger the minor’s life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after reasonable effort has been made to reach me. I release First Congregational Church, their employees, and volunteers from any claim of liability in connection therewith. Dates this release is intended: June 2022 – May 2023.*

\_\_\_\_\_ **Initial**

**2. Events / Activities:** *I grant permission for the minor(s) listed on this form to attend on-site & off-site events and activities of the First Congregational Church program in which he/she is enrolled. I will be notified in advance of such activities.*

\_\_\_\_\_ **Initial**

**3. Publicity:** *I grant permission for the minor(s) listed on this form to be photographed, videotape and/or voice recording and to use all for First Congregational Church directories and published promotional materials which may be included on the FCC website and/or Facebook Page. **I understand that this release will be valid and effective until revoked by me in writing and submitted to the First Congregational Church office.***

\_\_\_\_\_ **Initial**

**4. Sunday school Pick-up:** *I understand that my minor ages 3 years old to 10 years old will need to be picked up from the Sunday school classroom during the 2022-2023 program year. I grant permission for my minor over the age of 11 years old to be released from the class following the worship service. (If you check NO here, we will not release youth over the age of 11 until you come to pick them up).*

\_\_\_\_\_ **Initial**

- I do not authorize the release of my minor age 11 and older to be released from Sunday school class. I will pick up my minor up from the Sunday school class for the 2022-2023 program year.*

Signed \_\_\_\_\_ Date \_\_\_\_\_