

McEachern United Methodist Church Nursery Registration Form



My name is _____

I was born on (date) _____

My parents are _____

My address is _____

E-mail Address is _____

Phone # _____

Mommy and Daddy are willing to volunteer in the Nursery once every three months

() yes () no

Mommy and Daddy say that I may:

() have my bottle/cup

() have my snack they provide

() pacifier

() nap

Special Cares and Concerns:

I am () in Diapers () in Pull Ups () Potty Trained

Allergies: (Cause & Reaction description) _____

PARENT INFORMATION - IN CASE OF EMERGENCY:

Cell Phone Number(s): _____

Service normally attending: _____

Adult Sunday School Class: (Class name, Time & Room #) _____

Weekday Studies: (Class name, Day & Times, Leader & Room#) _____

We are () Members () Visitors () Would like information about McEachern UMC

Consent to Photo Agreement

I grant permission for my child's photograph or image to be published in print (newsletters, brochures, newspapers, etc...), video or on the internet in conjunction with the promotion of McEachern UMC. I understand that at no time will my child's partial or full name, or any identifying information, be attached to any material used in promotion.

Parent's Signature _____

Date Signed _____

