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| PERSONAL INFORMATION | | | |
| Child’s Name: | | | |
| Date of Birth: | Age: | Grade in school: | |
| School child attends: | | | |
| FAMILY INFORMATION | | | |
| Parent(s)/Legal Guardian(s) | | | |
| Address: | | | |
| Phone numbers: | | | |
| Email addresses: | | | |
| Names and ages of siblings (if any): | | | |
| GENERAL MEDICAL INFORMATION | | | |
| Allergies: | | | |
| Physical limitations/medical conditions/other health concerns/special needs: | | | |
| **Parental Consent**:  My child’s picture or person can be used to advertise Sunday school and other Children’s Ministry events in print (i.e., church newsletter or website): Yes\_\_No  And/or on social media (i.e., church Facebook page): Yes No | | | |
| Parents signature: | | | Date: |

Parent responsible to notify the church, in writing, if any of the above information changes.

This form can be emailed to the Children’s Ministry Director ([alethea.coulter@rushumc.org](mailto:alethea.coulter@rushumc.org)) or mailed/dropped off to the church office (Rush Church 6200 Rush-Lima Road, Rush, NY 14543)