

Cedar Valley Unitarian Universalists
Religious Education Registration
2015-2016

Registration fee for children and youths: \$25 per child with a maximum of \$65 per family per year.
Scholarships & payment plans are available upon request.

Child's Name _____ B-Date _____ Age _____ Grade _____
(last) (first)

Child's Name _____ B-Date _____ Age _____ Grade _____
(last) (first)

Child's Name _____ B-Date _____ Age _____ Grade _____
(last) (first)

Address _____ Phone _____
(street) (city) (zip)

Parent Name _____ Work Phone _____
(last) (first)

Parent Name _____ Work Phone _____
(last) (first)

Address (if different) _____ Phone _____

With whom does the child reside? _____ E-mail Address _____

Severe Allergies or Medical Information _____

Other Information that might be helpful _____

EMERGENCY CONTACT _____ PHONE _____

Sibling Names and birthdates not in the RE program _____

PARTICIPATION AUTHORIZATION

My child has permission to engage in activities offered by the Religious Education program. He/she has my permission to take any trips authorized by the program. I understand that I will be notified if the class plans to leave church grounds.

I understand that it is up to the discretion of the teacher(s) in consultation with the DCRE and/or the teacher(s) to temporarily remove any student from a class activity if it is deemed the student's behavior prevents the class from meeting its purpose. The student will be readmitted at such time as determined by the DCRE and/or the teacher(s) that the student has shown he/she can participate appropriately.

I give permission for my child's picture (children's pictures) to appear on: posters in the classroom, the newsletter, the brochure, on the web and/or in newspaper articles about the program. I may cross out ones that do not apply to my children.

PARENT SIGNATURE _____ DATE _____

PARENT VOLUNTEER INFORMATION

Please indicate which projects you would be willing to help with on an occasional basis, if you haven't already signed up.

____ Back up nursery care; ____ Substitute teacher; ____ Substitute helper; ____ Classroom Helper; ____ Sharing a skill: _____; I would like to teach _____; Please put any other information on the back. Thank you

For office use:

RECORDED ____/____/____ DATA BASE ____ CLASS ____ SERVICE ____ FEE \$ _____