

CrossTalk Kids Registration Form PreK - Grade 4 - PLEASE PRINT

Student's Full Name:	Entering Grade:
Emergency Contact: Relationship) :
Emergency Phone Number:	-
Yes, I am interested in helping with this ministry:	-
NOTHING HAS CHANGED SINCE LAST REGISTRATION:	-
Mother's Full Name (with maiden name):	
Father's Full Name:	
Address: Alternate Address: _	
Home Phone: Student Cell Pho	one:
Mom Cell Phone: Dad Cell Phone:	
Mom email: Dad email:	
Student email: Home email:	
Birth Date: City where Born:	<u> </u>
Church Baptized: Sponsors:	
First Communion Received: Yes No Church where Con	mmuned:
Does your child have any allergies or special needs? If so, please de	etail below:
May your child occasionally consume food and/or treats in class?	

PLEASE COMPLETE SECOND SIDE

CHRIST LUTHERAN CHURCH

Youth Photo Release

I, the legal parent/guardian of (child's name)	
authorize and consent to the use of images or videos of my child listed aborname, by Christ Lutheran Church of Somerset, WI for purposes including b	out not limited to:
promotional materials, printed publications, internet posts including socia other media sources.	l media, television, and
I do this with full knowledge and consent and waive all claims for compens damages. I release Christ Lutheran Church, its officers, trustees, employee for any claims by me or any third party in connection with the use of the in above.	s, and agents from liability
Parent/Guardian Signature:	
Printed Name:	
Date:	
Christ Lutheran Church may typically publish photos taken at events relate promotional materials.	ed to CLC on Facebook and
I DO NOT WANT my child's photo used in any online social med promotional material.	ia postings or
Child's Name:	
Parent/Guardian Signature:	
Printed Name:	
Date:	