

# REGISTRATION

## Grace Formation 2010-2011

**PLEASE FILL OUT A SEPARATE FORM FOR EACH CHILD.**

*Please check the appropriate level:*

Nursery \_\_\_\_\_

Rite 13 (age 11-13) \_\_\_\_\_

Level I (3 yrs. – kindergarten) \_\_\_\_\_

J2A (age 13-15) \_\_\_\_\_

Level II (1<sup>st</sup> grade – 3<sup>rd</sup> grade) \_\_\_\_\_

YAC (Young Adults in Church) (age 16-18) \_\_\_\_\_

Level III (4<sup>th</sup> grade – 6<sup>th</sup> grade) \_\_\_\_\_

Not Sure \_\_\_\_\_

Child's Name: \_\_\_\_\_

Birth date: \_\_\_/\_\_\_/\_\_\_ (MM/DD/YY)

Baptismal date: \_\_\_/\_\_\_/\_\_\_ (MM/DD/YY)

Grade in school in 2010-11: \_\_\_\_\_

Guardians: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Address(es): \_\_\_\_\_

\_\_\_\_\_

City, State ZIP \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ h \_\_\_\_\_ w Best times to call: \_\_\_\_\_

Guardian's signature: \_\_\_\_\_

If you are interested in any of our choirs for children and youth, please check all that apply and our Parish Musician will contact you with more information:

Cherubs (age 18 mos. – 6 yrs.) \_\_\_\_\_  
Meets Sunday morning

Schola (2<sup>nd</sup> grade – 8<sup>th</sup> grade) \_\_\_\_\_  
Meets Wednesday after school

Madrigals (high school) \_\_\_\_\_  
Meets Sunday afternoon

Please list any dates that you know in advance your child(ren) won't be attending formation

programs: \_\_\_\_\_

Updates (*for use by Catechists*):

**MEDICAL AND EMERGENCY INFORMATION**

Child's Name: \_\_\_\_\_

Which Sunday service do you most regularly attend? \_\_\_\_\_

Where will you be while your child is in Grace formation programs? (e.g., choir practice, adult formation class, altar guild....)

\_\_\_\_\_  
\_\_\_\_\_

Does your child have any medical condition we should be aware of? (e.g. learning disability, ADD, asthma, epilepsy....)

Is there anything that you would like us to know about your child?

In case of emergency, contact: \_\_\_\_\_

Guardian's signature: \_\_\_\_\_

PERMISSION

Grace Episcopal Church  
924 Lake Street  
Oak Park, IL 60301  
708-386-8036

RELEASE

The undersigned parent or legal guardian of \_\_\_\_\_, a minor child, does hereby grant permission for the said child to engage in the various activities sponsored by Grace Episcopal Church for its Formation Programs, including, but not limited to, travel in automobiles, attendance at related group activities, and general participation in any and all activities sponsored by or associated with Grace's Youth.

I understand that my child may be photographed or videotaped from time to time in relation to these activities, and I hereby grant my permission to allow my child to be videotaped and/or photographed in this manner, and grant to Grace Episcopal Church the right to publish, copyright or use these images as it sees fit.

This consent also includes specific permission hereby granted to the adult supervisors and leaders of Grace's Youth to make medical decisions with respect to the said minor child in the event of accident or injury when parental consent shall be unavailable or when circumstances shall require immediate medical decision, and to administer medication when required.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Parent or legal guardian

**Medical insurance information:**

Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Medical Concerns/Restrictions:

(i.e., asthma, allergies, food allergies, medications, disabilities, etc.)

\_\_\_\_\_  
\_\_\_\_\_