

TRINITY UNITED METHODIST CHURCH
361 Sumner Ave., Springfield, MA 01108; 413-737-5311; www.trinityspringfield.org
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One form should be filled out for each child/youth from birth through high school, including those who will participate in classes, choirs, Youth Group, Chapel Kids, Bible Story Time, and Boar's Head Festival.

Child's name _____ Preferred pronoun _____

Allergies _____

Special needs _____

Baptized **Yes/No** Confirmed? **Yes/No** Birth date ____/____/____ Grade _____

Family information

Parents/guardians _____

Address _____ City _____ Zip _____ State _____

Home phone _____ Cell phones _____

Family email address _____

Emergency Contact

Name _____ Relationship _____

Cell phone number _____ Home phone number _____

Photo Release

I grant Trinity United Methodist Church permission to use my child's/children/s likeness in photographs and/or videos in any and all of its print or electronic publications, marketing, or public relations, such as newsletters, brochures, websites, promotional items, or other such material, and in and all other media controlled by Trinity United Methodist Church, in perpetuity, and for other publications or promotional use by Trinity United Methodist Church. I will make no monetary or other claim against Trinity United Methodist Church for the use of photographs or videos. Names are not used. **Yes/**

No

Classroom Permission Slip

I agree that teachers may take children and youth outside the classroom while remaining on church grounds. This may include having class in another part of the building or outside. Any off-campus activities will require separate notification and permission. **Yes/No**

Safe Sanctuaries

I agree to abide by our policy that children in grade 5 and younger be dropped off and picked up by a parent or other designated adult. They should also be accompanied any time they leave the sanctuary during worship (other than to Chapel Kids or with choir). **Yes/No**

Parent/guardian signature _____ Today's date _____