## **Step 1: Parent/Guardian Information**

	it / Guardian 1	<u>L</u>		Parent / Guardian	<u>n 2</u>			
Name:	Mr./ Mrs./ Ms.			Name: Mr./ Mrs./ Ms	s			
DOB: _	OOB: / / Cell Phone: ()			DOB: / / Cell Phone: ()				
Email:				Email:				
Relatio	onship to child: _			Relationship to child				
Does th	s this guardian live at the address below? Y / N			Does this guardian live at the address below? Y / N				
)thers i	Authorized to Pi	ck up child(ren):		·				
p 2: /	Address							
				C'I		Stat	٥.	7in·
Home <i>F</i>	Address:			City:		5.61	c	<del>_</del>
		)		City:		Stat	e	
Home F	Phone: (	) nild Informatio	n	City:				
Home F	Phone: ( Individual Ch First Name:	) nild Informatio	<b>n</b> Last Name:		DOB:	/	/	Gender: _
Home F ep 3: I Child #1	Phone: ( Individual Ch First Name: Grade:	) nild Informatio School:	<b>n</b> Last Name:		DOB:	/	/	Gender: _
Home F  p 3: I  Child  #1	Phone: (  Individual Ch  First Name:  Grade:  First Name:	) nild Informatio School:	n Last Name: Last Name:	Allergies/ Special Needs:	DOB:	/	/	Gender: _ Gender: _
Home F  Pp 3: I  Child  #1  Child  #2	Phone: ( Individual Ch First Name: Grade: First Name: Grade:	nild Informatio  School:  School:	n Last Name: Last Name:	Allergies/ Special Needs:	DOB: DOB:	/	/	Gender: _ Gender: _
Home F  child #1  Child #2	Phone: (  Individual Ch  First Name:  Grade:  First Name:  Grade:  First Name:	nild Informatio School: School:	Last Name: Last Name: Last Name: Last Name:	Allergies/ Special Needs: Allergies/ Special Needs:	DOB: DOB:	/ / /	/ /	Gender: _ Gender: _ Gender: _
Child #1 Child #2 Child	Phone: ( Individual Ch First Name: Grade: First Name: Grade: First Name: Grade: First Name:	nild Informatio  School:  School:	Last Name: Last Name: Last Name:	Allergies/ Special Needs: Allergies/ Special Needs:	DOB: DOB:	/	/	Gender: _ Gender: _ Gender: _

By registering my child for Mandarin UMC Children's Ministry, I authorize that my child's image may be used in photographs, video, print and web presentations. By giving my email I understand that I will be added to Mandarin United Methodist's mailing list and data base. We will not share with third parties.

Name (printed):	Signature:	Date:
'' '		