

Interfaith Un-Sunday School Registration 2017-18

Please complete and return to the church office by **September 15, 2017**.

Parent/Guardian 1 _____ Cell phone _____

Parent/Guardian 2 _____ Cell phone _____

Address _____ City _____ Zip _____

Home Phone _____ Email Address _____

Student 1 _____ Nickname _____

Birth Day _____ School _____ Grade _____

Any Known Food Allergies _____

Any special needs/challenges your child faces (this will be kept confidential)

Student 2 _____ Nickname _____

Birth Day _____ School _____ Grade _____

Any Known Food Allergies _____

Any special needs/challenges your child faces (this will be kept confidential)

_____ **(Parent/Guardian Initials)** I give my permission to Lake Washington Christian Church to use photographs and videos of my child/ren in public displays, media releases and social media. I understand these photographs will not be sold or used for commercial purposes.

Lake Washington Christian Church is committed to keeping children safe, consequently we require all our adult volunteers to undergo background screening, and two unrelated adults in the room with children at all times. Our guidelines are outlined in our Safe Sanctuary Policy, available in our church office.

Participant Covenant of Conduct (to be completed by youth and parent/guardian)

- I will respect the property of others, the facility, and the world around me
- I will respect the adults who are supporting the activities
- I agree to treat every person with dignity and respect, and will not verbally or physically harm another person
- I will participate to the fullest of my ability

Participant: I, _____, understand these guidelines are necessary to ensure a safe event and will follow them out of respect. Should I choose not to follow them, I understand and agree to accept the consequences decided upon by the leader(s), including parent notification and possible removal from the activity.

Parent/Guardian: I (We), _____, have reviewed this covenant with my/our child and understand it. I /We support the leadership and will be responsible for expenses incurred as a result of our child breaking the covenant.

Signature of Parent/Guardian _____ **Date** _____