



Student Registration Form 2023-2024

STUDENT INFORMATION

Student #1

Name _____ Birthday _____

Student's Age _____ Grade in School _____ School _____

ALLERGY CONCERNS. Please list and known allergies or conditions that would affect your child's participation: _____

Student #2

Name _____ Birthday _____

Student's Age _____ Grade in School _____ School _____

ALLERGY CONCERNS. Please list and known allergies or conditions that would affect your child's participation: _____

Student #3

Name _____ Birthday _____

Student's Age _____ Grade in School _____ School _____

ALLERGY CONCERNS. Please list and known allergies or conditions that would affect your child's participation: _____

CONTACT INFORMATION

Parent's Name(s) _____

Address _____

Cell Phone _____ Cell Phone #2 _____ Receive tests? Y/N _____

Email _____

Second Emergency Contact:

Name(s) _____

Cell Phone _____ Cell Phone #2 _____ Receive tests? Y/N _____

Email _____

PHOTO POLICY

I give permission for VOICES OF GRACE EMMANUEL KIDS MUSIC MINISTRY to take and use photographs of my child(ren) for the promoting of the church and its programs. I understand that photographs taken by the church may be stored and used for promotional purposes from time to time. No photos will be sold or released to third parties. No child's name will be identified in any publication.

- Yes, I give my permission.
- No, I do not give permission.

Initials: _____

REGISTRATION FEES

- \$25 For one student
- \$50 For two students
- \$50 For three students
- \$75 For four students

Total fee due before September 20, 2023.

Initials: _____

PAYMENT POLICY

I understand that the registration form and payment must be received before the first session on September 20, 2023. The registration fee covers the Fall session beginning on September 20, 2023, and ending November 15, 2023.

Payment for the 9-week session paid in full by cash, debit card or check (payable to EMMANUEL LUTHERAN CHURCH).

Initials: _____

Parent (Guardian) Signature: _____ Date: _____