

NORTHSIDE SAFE KIDS INFORMATION FORM

(Please print clearly.)

Date _____

<u>Parent/Guardian First & Last Name</u>	<u>Home Phone</u>	<u>Cell Phone</u>	<u>Email</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____

Name of Parents'/Guardians' Sunday Adult Bible Class: _____

Mailing Address _____

Street	City	State	Zip
--------	------	-------	-----

<u>Child's First & Last Name</u>	<u>Birthdate</u> <u>M/D/Y</u>	<u>Boy</u>	<u>Girl</u>	<u>Grade</u>	<u>School</u>
1. _____	_____	B	G	_____	_____
2. _____	_____	B	G	_____	_____
3. _____	_____	B	G	_____	_____
4. _____	_____	B	G	_____	_____
5. _____	_____	B	G	_____	_____
6. _____	_____	B	G	_____	_____

List any medical concerns/special needs/allergies/restrictions (behavioral, physical, food) for each child that we need to be aware of:

Can your child/children be photographed or be on video? _____ Yes _____ No
(Only to be used for Northside publication)

If your child is in "Safari to the Son"-(1st—4th Grade), please check one of the following:

_____ *Please allow the following child/children to LEAVE at the end of class:

_____ *Please KEEP my child/children in class until he/she is PICKED UP:
(Please list child/children's name(s) & all people who you anticipate will be picking up your child/children.)
