



**United Unitarian Universalist Congregation  
Religious Education/ Youth/ Childcare Registration  
2019-2020**

Please complete all sections of the registration form for all **CHILDREN** who will be involved in **any** youth programs. This involves childcare, Religious Education, and youth group. (*PLEASE PRINT LEGIBLY*)

**Parent/Guardian 1 Full Name:**

\_\_\_\_\_  
(First) (Last)

Address: \_\_\_\_\_

(Street) (City) (State) (Zip)

Phone Day: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_-\_\_\_\_

E-mail: \_\_\_\_\_

**Parent/Guardian 2 Full Name:**

\_\_\_\_\_  
(First) (Last)

Address: \_\_\_\_\_

(If different from parent 1) (Street) (City) (State) (Zip)

Phone Day: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_-\_\_\_\_

E-mail: \_\_\_\_\_

**Children and Youth**

Name (first and last) Birth date Grade, Preschool

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Please list any special needs, allergies, especially **food allergies**, health conditions, learning issues for each child, if any:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

United UUC offers a cooperative ministry for all children and youth. In order to provide quality Religious Education and Youth Programming, we depend on the support of the entire congregation. Therefore, each adult with children registered is asked to make a commitment to help in the program. Below is a list of volunteer opportunities to consider. Please indicate the areas in which you can provide assistance if it is needed.

If there are two adults, please specify "P1" and "P2" to indicate your particular volunteer preference.

**Volunteer Opportunities:**

- \_\_\_ Teach children's RE class
- \_\_\_ Help with service projects
- \_\_\_ Assist children's RE class
- \_\_\_ Substitute (ages/grades) \_\_\_\_\_
- \_\_\_ Special Events
- \_\_\_ Other \_\_\_\_\_

\_\_\_ ***Please check here if you are not able to volunteer due to extenuating circumstance,***

and the Director of Religious Education will contact you to discuss options.

\*I will allow my child/ren to be photographed and his/her photo used for the promotion of  
United Unitarian Universalist Congregation

Yes/ Please initial \_\_\_\_\_

No/Please initial \_\_\_\_\_

The undersigned parent or legal guardian hereby gives permission for the above registered children to participate in the United UUC Religious Education and Youth Programs. I/We agree to pick up our child/ren immediately after the church service. Children will not be dismissed without a parent or guardian. This permission also authorizes the supervising adults to seek emergency medical treatment for my children when deemed necessary. This consent is effective September 1, 2019 through August 31, 2020.

\_\_\_\_\_  
Parent/Guardian 1 signature

\_\_\_\_\_  
date

\_\_\_\_\_  
Parent/Guardian 2 signature

\_\_\_\_\_  
date