

星期六  
娛樂 & 遊戲



# Saturday Fun & Games

Christ Church, Lutheran  
Registration Form

Child's Name \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

(Fun & Games is for children grades K through 5<sup>th</sup>.)

Grade in school & Name of School: \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Parent/Guardian Phone Number H: \_\_\_\_\_

C: \_\_\_\_\_ W: \_\_\_\_\_

In case of Emergency, please contact: \_\_\_\_\_

Emergency phone number: \_\_\_\_\_

Person(s) allowed to pick up child \_\_\_\_\_

Please add additional names on back - anyone who drops off or picks up must be listed.

\_\_\_\_\_

Note that adult leaders who are regular volunteers are finger-printed and background-checked as required under California state law. Children are always attended by at least 2 adults. Please contact us with any questions about safety.



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## Minor Photo/Image Release Form

*We would like to take photos of this event to share with our congregation and community. These photos might be used in our newsletter, on our website, in our Synod newsletter, or in materials related to future offerings of Saturday Fun & Games. Please indicate whether you would like your child to appear in these photos below.*

I give Christ Church, Lutheran, permission to publish in print, electronic or video format, including web use, a picture/video, the likeness or image of myself and/or my child as described above. I release all claims against Christ Church, Lutheran, with respect to copyright ownership and publication including any claim for compensation related to use of the materials.

This release shall be effective from date of signing until revoked. All pictures, videos, likenesses, or images taken or created while this release is in effect shall remain released in the event this release is later revoked.

I agree:

I do not agree:

\_\_\_\_\_  
Minor's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Parent or Guardian

\_\_\_\_\_  
Signature of Parent or Guardian



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## MEDICAL RELEASE/ACTIVITY PARTICIPATION FORM

\_\_\_\_\_ has permission to participate with Christ Church, Lutheran on the activity listed below:

**ACTIVITY:** Saturday Fun & Games

**DATE:** Days in Attendance at Saturday Fun & Games

**KNOWN ALLERGIES:**

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**MEDICAL CONDITIONS OR OTHER CONDITIONS THAT WE SHOULD KNOW ABOUT IN ORDER TO CARE FOR YOUR CHILD:**

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**WHAT ELSE SHOULD WE KNOW ABOUT YOUR CHILD?**

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**INSURANCE INFORMATION:** (Policy name, policy number) Please attach a copy of the front and back sides of your medical insurance card.

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Christ Church, Lutheran and all adult volunteers are not liable for any injury that may occur. They will seek to reach you in the case of emergency. They are authorized to seek emergency medical treatment for your child(ren) as they deem necessary.

\_\_\_\_\_  
(Signature of parent or guardian)

\_\_\_\_\_  
(Date)