



# REGISTRATION FORM

TUESDAYS • 6-8 PM • KIDS GRADES K-5 • JANUARY 7 - MARCH 10  
COST: \$35 PER CHILD

Willow Park Clubs is a fun, safe place where children deepen their relationship with God and friends. Kids will be actively seeking God's love through games, crafts, worship and Bible stories while learning that they can be game changers in their homes, community and world.

## REGISTRATION INFORMATION

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

Session 2: JAN. 7 - MAR. 10, 2020 (\$35)

Grade as of Sept/19: \_\_\_\_\_

Parents/Guardian's Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email : \_\_\_\_\_

## MEDICAL INFORMATION

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

Date of Birth: \_\_\_\_\_

Care Card #: \_\_\_\_\_

Allergies/Medications/Limitations

Emergency Contact: \_\_\_\_\_

### *For office use only*

Paid \$ \_\_\_\_\_ Date \_\_\_\_\_

Cash       Chq# \_\_\_\_\_       Debit

### TERMS AND CONDITIONS

1. I understand the participation in Club activities involves a certain degree of risk. I have carefully considered the risk involved and have given consent for my Child/Ward to participate in Club activities. I understand that participation in Club activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I hereby release and indemnify Willow Park Church and the BCMB Conference and all related directors, officers, employees, volunteers, and other organizations associated with Club activities from any and all claims for damages arising from any accident of injury caused by my Child's/Ward's participation in the Club activities.
2. I understand that my Child/Ward may experience illness or accident that may require immediate medical or surgical attention. I hereby give the Club personnel the authority to act on my behalf in case of emergency, including medical treatment, without the necessity of my prior approval (Parent/Guardian will be notified as soon as possible). I understand that I am financially responsible.
3. Where the club program involves leaving the Willow Park Church premises, I give my Child/Ward permission to participate.
4. The Parents/Guardians submitting this application are those having legal custody over the Child/Ward. Conditions of custody, if applicable, will be fully communicated, in writing, to the Club personnel...including a photocopy of the section of any court order referring to the visitation rights.

I, \_\_\_\_\_ am the legal Parent/Guardian for the Child/Ward named on this form.

Parent/Guardian Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

Register online at [willowparkchurch.com/clubs](http://willowparkchurch.com/clubs) or email [kids@willowparkchurch.com](mailto:kids@willowparkchurch.com) for more info.

