

Faith Presbyterian Church
Census & Family Ministries Programs Registration



2009/2010

Return form by September 23, 2009

Are you a member of Faith Church? YES NO

CHILD(REN) LIVE WITH: (check all that apply)

Both parents Mother Father
 Stepparent Guardian Other

If Other, please specify _____

FATHER FIRST NAME _____ MOTHER FIRST NAME _____ FAMILY LAST NAME _____

Mailing address _____

City, State, Zip _____

HOME PHONE

FATHER
 DAY PHONE _____
 CELL PHONE _____

MOTHER
 DAY PHONE _____
 CELL PHONE _____

PARENT'S EMAIL ADDRESS _____
 (PLEASE PRINT)

Mother Father
 Home email Work email Yes, you can contact me at this email address with updates and information

Student Information	1st Child	2nd Child	3rd Child	4th Child
First Name				
Last Name (if different)				
Student Cell phone				
Student email address				
Grade in 09/10				
School in 09/10				
Birth Date				
Gender				
Are you Baptized/date?				
Are you Confirmed/date?				
Would like information for Baptism &/or Confirmation				

PROGRAM REGISTRATION To register your child(ren) in Family Ministries Programs, move down the column for each child and **write the Grade in the box** of the program for which you are registering.

Sunday School (Nsy-6th) Sundays 10:15-11:00 am				
AdventureQuest (1st-6th) Wednesdays 6:00-7:30 pm				
Lighthouse (7th-9th) Wednesdays 6:00-7:30 pm				
Focus (10th-12th) Wednesdays 7:00-8:30 pm				

To better serve you, list any Special Needs (Dietary, food allergies, LD, ADHD, Physical restrictions, etc.

Special Needs/Disabilities/Allergies				
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MINISTRY INVOLVEMENT

Each family is encouraged to share their time and talents in some way with the program. We also welcome teen volunteers. Please check the appropriate boxes.**

Parent Name (A) _____

Parent Name (B) _____

Teen Name (C) _____

Teen Name (D) _____

I WOULD BE INTERESTED IN VOLUNTEERING WITH (PLEASE SELECT AT LEAST ONE)

**List the letter that corresponds to the name of the volunteer.

_____ Sunday School Leader What age or grade interested in helping with? _____

_____ Wednesday Meal Hospitality

_____ AdventureQuest Group Leader What age or grade interested in helping with? _____

_____ AdventureQuest Support (Help students get to choir & classrooms, set up or tear down, Games, Music)

_____ Lighthouse Group Leader

_____ Lighthouse Support (Help with special events or trips, student mentor, discipleship)

_____ Focus Group Leader

_____ Focus Support (Help with special events or trips, student mentor, discipleship)

_____ Wednesday Night Open Gym helper (AdventureQuest, Nursery-K, Lighthouse, Focus)

_____ Pray in support of Family Ministries

Student Emergency Medical Information

Contact/Relationship _____ **Phone** _____

Insurance Company _____ **HP#** _____ **Group#** _____

Family Doctor/Clinic _____ **Phone** _____