

# CLC CHILDREN'S MINISTRY WELCOMES YOU!

## Kids Connection Sunday School Registration

Please print neatly. We want to make sure our records are current & accurate.

Thank you! ☺

1. Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Grade \_\_\_\_\_

2. Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Grade \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work # \_\_\_\_\_

Cell Phone # \_\_\_\_\_ (whose # \_\_\_\_\_)

The best times / ways to reach me: \_\_\_\_\_

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

Family Website or Child's Email: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State NV Zip \_\_\_\_\_

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

Occupation of Parent/Guardian(s): \_\_\_\_\_

Parent/Guardian: \_\_\_ is a Member \_\_\_ Attends here

Person bringing & picking up child \_\_\_\_\_

Child will attend: Sat - 6:00 pm, Sun - 9:20 & 10:45 am (circle one)

\_\_\_ Please contact me and let me know about other children's programs & events.

\_\_\_ I would like to get involved in Children & Family Ministry here at CLC!

**I will support my child and Children's Ministries by praying for them and:**

\_\_\_ **Help** as a **Shepherd** (a weekly host/ guide/ friend to children / assistant)

for \_\_\_ 3-5 yr olds, \_\_\_ K, \_\_\_ 1st-2nd \_\_\_ 3rd-4th, \_\_\_ 5th-6th gr

\_\_\_ **Teach** \_\_\_ 3-5 yr olds, \_\_\_ K, \_\_\_ 1st-2nd \_\_\_ 3rd-4th, \_\_\_ 5th-6th gr

\_\_\_ **Host**, Greet & Register children: to welcome & invite & help families

\_\_\_ **Special Events Party Planner** to create & organize fun, safe events

\_\_\_ **Coordinate Sunday School** at \_\_\_ 6 pm Sat \_\_\_ 9:20 am \_\_\_ 10:45 am Sun

\_\_\_ Make follow-up phone calls, help with mailings, or organize supplies

\_\_\_ **Assist** with copying, data entry, record keeping, computer-related help

\_\_\_ **Help in any way you need me!**

My previous experiences with children include \_\_\_\_\_

For security of our children, we request a FBI background check prior to working with children.

Have you ever been fingerprinted? \_\_\_ If yes, please explain on the back: \_\_\_\_\_

For the safety of our children, do you know CPR? \_\_\_ First Aid? \_\_\_

I will help my child practice putting their faith into action, learn good stewardship, and giving back to God with a cheerful heart by:

\_\_\_ Encouraging my child to bring an offering to Sunday School each week.

P.S. \_\_\_ I need Offering Envelopes for my child.

\_\_\_ Encouraging my child to share his/her God-given gifts in a ministry or getting involved in a ministry together as a family.

\_\_\_ Giving my child responsibilities at home that help the family.

\_\_\_ Showing my child how to help someone else or letting them help.

\_\_\_ Modeling a giving heart myself through my offerings & sharing in ministry.

Attached is my donation of \$ \_\_\_\_\_ to help as needed.

Things I'd like you to know about my child:

Learning, Behavioral, or Medical Needs \_\_\_\_\_

Recommendations:

Known Allergies to Food/Medications: \_\_\_\_\_

Recommendations:

### AUTHORIZATION:

I hereby give permission for \_\_\_\_\_ to participate in all activities of Kids Connection Sunday School. In the event of an emergency, know that every effort will be made to contact a Parent/Guardian immediately. I authorize Community Lutheran Church to administer any first aid or medical treatment necessary and release them from any and all responsibility in connection therewith. I understand my photo or my child's photo may be taken for use in Children's Ministry promotional literature or on the kids' bulletin board. I waive the right to inspect or pre-approve the photo if used for such purposes. I will support or assist in any way that I am able.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Relationship \_\_\_\_\_ Today's Date \_\_\_\_\_

Thank you for sharing God's love by making a positive difference in a child's life.

Please return this completed registration and mail to:  
Children & Family Ministries, Community Lutheran Church  
c/o Alene Olson, Director of Children's Ministry or Sandy LeBlanc, Assistant  
3720 E. Tropicana Ave., Las Vegas NV 89121-7337  
(702) 458-2241, Alene ext. 214 or Sandy ext. 248