



Kids Ministry Registration

Mom's Name _____ Dad's Name _____

Child's Name _____ Birth Date _____

Grade/Age Level _____ School _____

Child's Name _____ Birth Date _____

Grade/Age Level _____ School _____

Child's Name _____ Birth Date _____

Grade/Age Level _____ School _____

Address _____ City/Zip _____

Phone number (home) _____ (cell) _____

Special needs (custody issues, allergies, medical/behavioral needs) _____

Occasionally, one of our background checked volunteers will take pictures to be used for North Hills Church newsletters and promotional materials. When published, photos will never include your child's name. Please sign below to give permission for our photographer to take pictures of your child.

Signature (parent/guardian) _____ Date _____

For NHCOCG: Entered in CDM+ on _____ by _____ Ret'd to Kid's Ministries _____



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