

# WESTCITY CHURCH

Love God | Love People | Follow Jesus

## ***New Families Information Form 2024***

*Confidential registration form for all Westcity Families and Visitors with children (Birth to Yr 6.) attending Youth, Children's Church and/or Creche. Please complete and hand to Mel or Theo.*

<b>Primary Contact: Parent / Guardian Name</b>	<b>Secondary Contact: Parent / Guardian Name</b>
<b>Mobile:</b>	<b>Mobile:</b>
<b>Email:</b>	<b>Email:</b>
<b>Would you or your partner like to volunteer in our Children's program?                      Yes / No</b>  (Volunteers are rostered on about once every 3 months, or once during school holidays)	<b>Emergency Contact (other than a parent/guardian):</b>  <b>Name:</b> <b>Mobile:</b> <b>Relationship to child:</b>

<b>Child's Name 1:</b>	<b>Child's Name 2:</b>
Gender:	Gender:
Date of Birth:	Date of Birth:
School:	School:
Grade (2024):	Grade (2024):
Allergies or medical conditions: <i>(if severe, please provide us an Action Plan)</i>	Allergies or medical conditions: <i>(if severe, please provide us an Action Plan)</i>
Anything else we may need to know about, in caring for your child:	Anything else we may need to know about, in caring for your child:

<b>Child's Name 3:</b>	<b>Child's Name 4:</b>
Gender	Gender
Date of Birth:	Date of Birth:
School:	School:
Grade (2024):	Grade (2024):
Allergies or medical conditions: <i>(if severe, please provide us an Action Plan)</i>	Allergies or medical conditions: <i>(if severe, please provide us an Action Plan)</i>
Anything else we may need to know about, in caring for your child:	Anything else we may need to know about, in caring for your child:

**Parent Agreement & Authority:**

I/we give consent to my children attending Westcity Church's Children's/Creche/Youth Ministry Program. I understand that from time-to-time meetings and activities are held elsewhere within the grounds of the church (and sometimes off-site for Youth). I/we consent for the leaders in charge to arrange for medical services necessary in the event on an emergency; and agree to pay all associated medical expenses incurred on behalf of my child. I agree to indemnify and hold harmless Church of Christ WA and Westcity Church against all claims, demands, suits and liability of whatever nature and howsoever arising out of the injury to the child, and the relevant activity being undertaken. I understand that my children may be included in photos taken on occasion during church events and used in church communications. I/we will be happy to receive information relating to children's/creche/youth events and church-wide information about Westcity, using the email address listed on this form. By signing my name below and submitting this form, I/we consent to these conditions.

- Please be aware that you are required to stay in the church building/ grounds, during the program.
- It is also **important that you sign your child/children in on arrival as well as sign them out when you collect them** after the program.

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

You and your family are so welcome at our church and we are really glad to have you join our church community.

*Westcity Children's, Creche & Youth Ministry Team*