



# CALVARY CHAPEL CHELMSFORD

## *Christian Education and Family Ministry*

### Registration for Birth – Kindergarten

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

Date of Birth: \_\_\_\_\_ Male or Female (please circle)

Parent or Guardian's Name: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

☐ We will be attending first service (9:00AM)

☐ We will be attending second service (11:00 AM)

Name of person(s) who will be picking him/her up:

\_\_\_\_\_

Please list any allergies, special needs, or other helpful information about your child below.

\_\_\_\_\_

Is your child toilet trained? Yes / No

### **Parental Involvement**

We have dedicated and gifted teachers for each class, but in order to make sure we have enough adult supervision for all our classes, we ask that ONE PARENT FROM EACH FAMILY be available ONE SERVICE PER MONTH to be a teacher's helper. If you are unable to serve on your assigned week please contact us and we will make a substitution.

☐ Yes, I understand, please register my child and place me on the schedule

☐ I am unable to serve in this way, please contact me to discuss an alternative

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*Train up a child in the way he should go, and when he is old he will not depart from it.*

*Proverbs 22:6*