

# Mount Tamalpais United Methodist Church

## Nursery Registration 2018-2019

Please complete one form per child. Todays Date: \_\_\_\_\_

Child's Name (First and Last): \_\_\_\_\_ Nickname: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you and your child members of Mt. Tam United Methodist Church (membership not required)? Y N

If not, are you interested in membership? \_\_\_\_\_

Does your child have any allergies or issues we should be aware of?

\_\_\_\_\_

Parent's Name (1): \_\_\_\_\_

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

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

Parent's Name (2): \_\_\_\_\_

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

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

**\*If there are other adults or older siblings who drop off or pick up your children from the nursery, please list their names, and phone number and email addresses (if applicable) on the back of this form.**

Emergency Contact Person (other than parents): \_\_\_\_\_

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

Comments (If any): \_\_\_\_\_

Parent's (or other Adult's) Signature and Date: \_\_\_\_\_

**Photo Release** Please check all that apply:

- I give my permission for group photos including my child to be used on the church's website, on bulletins or monthly newsletters and any other medium used to promote church activities (flyers, etc)
- I give my permission for individual photos of my child to be used on the church's website, on bulletins or monthly newsletters and any other medium used to promote church activities (flyers, etc)
- I do NOT give my permission for photos of my child to be used in any manner.
- I give my permission to use photos if you check with me first.

\*If you have any questions about this form or about our nursery program, please contact Tricia Wiig at [mtumc@pacbell.net](mailto:mtumc@pacbell.net) or 415-388-4456.