

**Oakdale Park Church Nursery Registration Form
For Wednesday Night Ministry
For Children Ages Infant – Pre-Kindergarten**

Parent/Guardian Name

Adult Program Attending or Volunteer Position

Parent/Guardian Name

Adult Program Attending or Volunteer Position

Address (including City and Zip Code)

Email Address

Home Phone Number

Cell Phone Number

Child's Name:	Date of Birth (m/d/yr)	Age	Gender	Medical Concerns, allergies, etc.

Photo Release

I give permission for my child(ren) to appear in photographs that may be used in brochures, flyers, church website, posters, etc. that the Oakdale Park Christian Reformed Church may produce. Yes No

Liability Release

The child(ren) listed have my permission to be cared for by Oakdale Park Church volunteers. I understand that care will be taken to assure their safety. If there should be an accident, I will not hold any coordinator, staff, volunteer, other parent, and/or Oakdale Park Christian Reformed Church liable.

Signature

Date