

**Mattapoissett Congregational Church  
Children/Older Youth  
2017-2018**

**PLEASE PRINT**

Family Last Name: \_\_\_\_\_

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

Address: (Street, Town, ZIP) \_\_\_\_\_

Mailing Address if different: \_\_\_\_\_

Best Phone: (circle cell, house, or work) \_\_\_\_\_ Phone: (circle cell, house, or work) \_\_\_\_\_

Family Email: \_\_\_\_\_

Child's Name	Age	Birthdate	Grade 2017/18	Allergies/ special needs	Please Circle interest: Ways to serve in worship
					Sing, Instrument, Acolyte, Reader, Greeter,
					Sing, Instrument, Acolyte, Reader, Greeter,
					Sing, Instrument, Acolyte, Reader, Greeter,
					Sing, Instrument, Acolyte, Reader, Greeter,

**FAITH MILESTONES I would like to receive information; please check**

**Baptism: any age** \_\_\_\_\_

**Confirmation: grades 8-12** \_\_\_\_\_

**Bible Milestone: grades 3-6:** \_\_\_\_ **Communion Milestone: grades 2-6:** \_\_\_\_\_

Parent Interest ----I am willing to help in the following areas?

\_\_\_ Teach                      \_\_\_ helper in Classroom                      \_\_\_ Nursery/Childcare

\_\_\_ Christian Ed Committee                      \_\_\_ Family Events                      \_\_\_ Help with Food for Fellowship

\_\_\_ Donate Supplies to classroom                      \_\_\_ White Gifts Christmas Pageant                      \_\_\_ Help with field trips

\_\_\_ Service Project                      \_\_\_ Assist with social media                      \_\_\_ photographer/organize pics

My child has permission to participate in walking field trips. All field trips will be with their class and supervised by adult volunteers.

Print children's name: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

I give Mattapoissett Congregational Church my permission for photos/videos to be taken of my child (ren) to be used for but not limited program promotion.

Print child(ren)'s name: \_\_\_\_\_ Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_