**2023-24 Registration**

**Sunday School** (PK-6) meets Sunday mornings from 9:00 to 10:15 a.m. starting **September 10, 2023.**

**W.O.W.** (K-6) and **Illuminate** (7-12) meet on Wednesdays from 5:30 to 7:00 p.m. starting **September 13, 2023**. There is a charge of $50.00 per child for the entire school-year, or $25.00 per child per semester to help cover the cost of dinner. **Scholarships are available upon request.**

Child’s Name Birthdate Grade Sunday School W.O.W. Illuminate

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Parent or Guardian: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

Email: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Parent Phone: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Youth Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Phone: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Allergies and/or medical concerns: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Medical Emergency:* In case of a medical emergency, I hereby give the First Presbyterian Church personnel authorization to take my child to the hospital for emergency care.

*Photo Consent:* I give First Presbyterian Church the right to use photos of my child in both printed and electronic publications.

Signature of parent/guardian: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Sponsor Participation**

The staff of W.O.W. consists largely of volunteers who willingly give their time to provide enriching activities for our children and youth. We also appreciate the active participation of parents. Opportunities are available for **meal preparation, meal serving, kitchen clean-up, or providing dessert. Please contact Megan at** **meganhighbargin@yahoo.com** **if you would like to help with meals or Shelli at** shelli.dart@gmail.com **if you can help with desserts.**

**Please flip over, read and sign page 2**

**2023-2024 Health Policy**

For the safety of other children and people of any age with weakened immune systems in our church family, I understand that my child(ren) must stay home if they are exhibiting any of the following symptoms:

* Vomiting and/or diarrhea within the last 24 hours
* Conjunctivitis/pink eye
* Fever of any kind within the last 24 hours (fever-reducing medicine cannot have been taken in the last 24 hours)
* Runny nose with green or yellow discharge
* Rashes/skin conditions such as impetigo, contagious cold sores
* Fifths Disease, Hand Foot Mouth, etc. in contagious stages
* Chicken Pox
* Lice/hair infection
* Covid-19
* Any illness that will keep your child(ren) from participating in the planned activities

 I understand if my child becomes sick during a church activity I will be contacted to come and pick them up.

Signature of parent/guardian:

 Date: