

## Chapel of the Hills Kids Club Permission Slip

**\*\*Email your completed registration form to: [cothwildkids@gmail.com](mailto:cothwildkids@gmail.com) \*\***

**One form per child – Form must be received no later than the day prior to the event.**

Registration is not a guarantee of participation. Make sure you receive a confirmation before attending.

I give permission for my child listed below to attend **COTH KIDS CLUB**.

**Printed name of Parent/Legal Guardian:** \_\_\_\_\_

**Signature of Parent/Legal Guardian:** \_\_\_\_\_

Date signed: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_

**If we are unable to reach the parent/legal guardian listed at the above phone numbers, who can we call?**

Alternate contact name: \_\_\_\_\_

Alternate contact phone number: \_\_\_\_\_

I give permission to the names listed below to drop off or pick up my child on my behalf (ID will be required):

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Please CLEARLY print information below:**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Circle one: Boy Girl

Medical Conditions: \_\_\_\_\_

Any medications: \_\_\_\_\_

Allergies: \_\_\_\_\_

\_\_\_\_\_ Please initial if you give your permission for Chapel of the Hills to use your child's photograph for promotional purposes.

**Please note:**

- Keep sick children at home.

**Please arrive promptly at 9pm for pick up.**

**Children will not be released to anyone not listed on your permission slip. We do not transport.**