

CONTACT INFORMATION:

PARENT(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE(S): \_\_\_\_\_

EMAIL: \_\_\_\_\_

MY CHILD NORMALLY ARRIVES TO EXPLORERS WITH: \_\_\_\_\_

CHILDREN:

	NAME	GRADE	BIRTHDAY
1.			
2.			
3.			
4.			
5.			

HEALTH INFORMATION:

NAME OF CHILD ALONG WITH FOOD ALLERGIES, MEDICATIONS, OR OTHER CONCERNS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHOTO RELEASE:

PLEASE SPECIFY BELOW IF THERE IS ANY MEDIUM IN WHICH YOU DO NOT AGREE TO HAVE YOUR CHILD'S PHOTO/VIDEO SHARED (PRINTED MATERIAL, SOCIAL MEDIA, WEBSITE, GATHERED WORSHIP, EMAIL, ETC.)

\_\_\_\_\_  
\_\_\_\_\_

IN CASE OF EMERGENCY CALL:

NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_