



Wednesday Night
Bible Study
6:30-8:15 PM
Registration Form



Grades K - 3
Cost: \$25 Annual Fee
(Book and curriculum)
Kid's Quest Bag \$10.00 (Optional)

Grades 4 - 6
(Meets in the Cornerstone)

Child's Name _____ Grade _____ DOB _____
Address _____ City _____ Zip _____
Phone (____) _____ Baptized? Yes No If yes, date _____
Email Address _____
Church Membership (Name) _____
Parent's Name(s) _____
Emergency Contact (Other than Parent) _____
Relation to Child _____ Phone _____
Other adults authorized to pick your child up _____
Food Allergies or Medical Conditions _____

MEDICAL CARE AUTHORIZATION

Pursuant to California Family Code §6910, I, _____, a parent/guardian having legal custody of _____, a minor child, hereby authorize St. John's Lutheran Church, an adult person into whose care such minor child has been entrusted, to consent to any X-ray examination (or similar examination such as by CAT scan), anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision and upon the advice of a physician and surgeon licensed under the provisions of the Medical Practice Act or to consent to an X-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care to be rendered to the minor by a dentist licensed under the provisions of the Dental Practice Act. I agree to pay any and all costs for the foregoing.

My medical insurance provider is _____
and my insurance certificate number and/or group number is _____
This authorization shall remain effective until May 27th, 2010.

Doctor's name _____ Phone _____

NOTIFICATION OF PUBLISHING OR SHOWING MINOR CHILD'S STILL OR MOVING IMAGE

I, the parent/guardian of _____, understand that from time to time pictures are taken during the activities at the St. John's Lutheran Church of Orange, CA, or under its direction, then presented in various church sponsored media. These include, but are not limited to, pictures, video productions, newsletters, television programs, web casts, brochures, handbooks, programs and Internet web pages. This section serves as notification to you that any meetings, events and activities (including worship) are considered public and may be video taped and/or photographed and used in the above listed manner.

Signed _____ Date _____

For more information please contact Jennifer Stoehr at (714) 288-4419 or
jstoehr@stjohnsorange.org



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