

Church Nursery Enrollment

Child Information

Child's Full Name

Date of Birth

Allergies / Medical Concerns

Parent / Guardian Information

Parent/Guardian 1 Name

Phone Number

Parent/Guardian 2 Name

Phone Number

Address

Emergency Contact

Contact Name

Phone Number

Relationship to Child

Permissions

☐

Permission for emergency medical treatment

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Permission for child to be photographed

Signature

Parent/Guardian Signature

Date