West Berlin Presbyterian Church Child Parental Consent Form

I give permission for my child to participate in Toddler & Parent programing at West Berlin Presbyterian Church. I release West Berlin Presbyterian Church and individuals from liability in case of accident during activities and while on church property, as long as, normal safety procedures have been taken.

I also commit to the following guidelines:

- Children who have had vomiting, diarrhea, or a fever of 100 degrees or above within 24 hours will not attend.
- Parents will alert church contact if children develop symptoms within 24 hours of having attended. (General alerts will be shared with other participants; no identifying personal information will be given to others.)
- Children will have immunizations appropriate to their age before attending.
- Parents are responsible for diapering and feeding.
- No snacks containing peanuts or tree nuts.

Parent's/Guardian's Signature	Date		_			
		Μ	F			
Child's Name	Date of Birth	Gend	Gender			
Child's Name	Date of Birth	M	F			
Child's Name	Date of Birth	М	F			
Father's/Guardian's Name	Mother's/Guardian's Name					
()	_()					
Home Phone Cell Phone	Home Phone Cell Phone	е				
Address	Address					
City, ST ZIP Code	City, ST ZIP Code	City, ST ZIP Code				
Email	Email					
Allergies/Special Health Considerations that mawill be shared with Ministry Staff/Volunteers)	be Important for the well-being of the child and other participa	ants (this inform	ation			
Permission to Use Photos (Optional) I give permission for the church, whether that be publications such as church newsletters, church	ing ministers, staff, leadership and/or volunteers to use photo of website, or other church related needs.	my child in chu	ırch			
Parant/Guardian's Signatura						