



## Unitarian Church of Evanston Religious Education Program Registration 2011-2012

All households with children in our Religious Education Program must return a registration form each year so that we have current and complete information about each child.

Registration forms may be completed and returned by mail to 1330 Ridge Avenue, Evanston, IL 60201; by fax to 847-864-1453; or email to re@ucevanston.org

Child's Name (first and last)	Birth date:	Gender	School Grade 2011-2012
	/ /		
	/ /		
	/ /		
	/ /		

	Household	Household
Parent Name:		
Address:		
City/State/Zip:		
Home Phone:		
Work/Cell Phone:		
E-mail:		

Please describe your child(ren)'s special needs, e.g. learning disability, food allergy, health concern or other situation of which we should be aware. Please describe any special techniques for dealing with your child's situation that may be helpful for us to know about. If your child's situation changes or you would like to discuss any concerns, please contact Rev. Connie Grant.

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If you would like to opt out of having your child(ren)'s picture included in any publicity or promotional materials, please check here and initial. \_\_\_\_\_  
initials

**Medical release:**

As parent and/or guardian, I do herewith authorize the treatment of my child(ren) by a qualified and licensed medical professional of the following minor in the event of a medical emergency which may endanger my child's life or cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me.

Child's Name	Medical allergies, Chronic Illnesses or other Medical Conditions:

Family physician \_\_\_\_\_ Phone \_\_\_\_\_  
 Other contact in case of emergency (name) \_\_\_\_\_  
 (phone) \_\_\_\_\_  
 Insurance company \_\_\_\_\_ Policy # \_\_\_\_\_  
 ID# \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
 Father/Mother/Legal guardian

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**For Parents:**

I am a Member \_\_\_\_\_ /pledging Friend \_\_\_\_\_ /Visitor \_\_\_\_\_

**I commit to actively support the Religious Education Program!**

*Check one or more roles (initial to indicate which parent wishes to serve in a particular role)*

- \_\_\_ **Classroom Teacher**  
 Prepare lessons using provided curriculum and resources as part of a teaching team.  
 Age(s) of interest: \_\_\_\_\_  
 (Recruitment of Teachers is generally done in May through August.)
- \_\_\_ **Music Program Volunteer**  
 Serve as a helper for the musician leading the activity (no preparation required)
- \_\_\_ **Classroom Substitute**  
 Serve as a substitute for anticipated or unexpected absences by regular teaching team members
- \_\_\_ **Help organize or coordinate a social or social action event**  
 Such as after-church lunches sponsored by program, Family Friendship Dinners, Ornament Sunday, Winter Retreat, Harms Woods Clean-up, Crop Walk, Soup Kitchens, or classroom social action projects
- \_\_\_ **Serve as a Sunday morning Greeter**  
 Help orient new families about the Religious Education Program