SUMMER 2011
SCHOOL AGE
REGISTRATION FORM

Child's Name _____

Grade Just Completed _____ Birth Date _____/_____/_____

Parents' Names_____

Street Address _____

City, State Zip _____

Email Address _____

Emergency Contact while child is at PDO:

Name_____Phone_____

Name_____Phone_____

Allergies _____

My child is current on all required immunizations and is in good health to participate in all PDO activities.
Signature_____Date_____

PWUMC PARENTS' DAY OUT
PHOTOGRAPHY RELEASE FORM

I HEREBY GIVE MY PERMISSION TO Platte Woods United Methodist Church to use and reproduce photographs and/or videos taken of my child while at Parents' Day Out without compensation. I understand that these images may be used in numerous ways, including but not limited to church publications, local newspapers, the Platte Woods Church Web site, etc. I agree that all such images shall remain the property of Platte Woods Church.

Child's Name _____

Parent's Name (printed) _____

_____ _____
Parent's/Guardian's Signature Date

LATE FEE AGREEMENT

I understand that Parents' Day Out closes at 3:00 P.M. each day. Signs indicating the current late fee schedule are posted throughout PDO. Late fees will apply beginning at 3:01 P.M. and are to be paid to the teacher on duty.

_____ _____
Parent's/Guardian's Signature Date