

# Register me for Time Lab!

Child's name \_\_\_\_\_

Gender: Male \_\_\_\_ Female \_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade completed \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parents/Guardian \_\_\_\_\_ Home phone \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency contact \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

Please place my child with \_\_\_\_\_

Name of home church \_\_\_\_\_

Food allergies Y \_\_\_\_ N \_\_\_\_ List \_\_\_\_\_

Medical concerns Y \_\_\_\_ N \_\_\_\_ Explain \_\_\_\_\_

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## PERMISSION TO USE IMAGES AND VIDEO

I hereby grant permission for \_\_\_\_\_  
CHURCH NAME

to record sounds, images, or video of my child \_\_\_\_\_  
NAME

while attending *Time Lab*. I also give permission for \_\_\_\_\_  
CHURCH NAME

at its sole discretion, to use these sounds, images, or videos in publications (including print, websites, and social media  
platforms) owned by \_\_\_\_\_  
CHURCH NAME

in relation to *Time Lab*.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE