



**HOLSTON VALLEY UNITARIAN UNIVERSALIST CHURCH  
Children and Youth Religious Education Registration Form 2011-2012**

**Student Information:**

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
School/Grade \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone ( ) \_\_\_\_\_

**Parent Information:**

Name(s) \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address (if different) \_\_\_\_\_  
e-mail \_\_\_\_\_ cell phone: \_\_\_\_\_  
Any additional information teachers should know: \_\_\_\_\_

**Please** describe any allergies, special interests, or problems that your child has that would be important for the teachers to be aware of:

\_\_\_\_\_

**Please** indicate below how **you** will be willing to support the HVUUC RE Program.

- |   |   |
|---|---|
| <input type="checkbox"/> Assist in my child's classroom | <input type="checkbox"/> Help with RE church programs       |
| <input type="checkbox"/> Help with Multi-age events     | <input type="checkbox"/> Chaperone lock-ins or field trips. |
| <input type="checkbox"/> Teach summer RE (2-4 Sundays)  | <input type="checkbox"/> <b>Provide snacks*</b>             |

**Emergency Consent Form:**

I give permission for \_\_\_\_\_ (child's name) to receive emergency medical treatment in case of my absence.

\_\_\_\_\_  
Signature and date

**Parent Information, Rights and Responsibilities:**

- All of our teachers and RE committee members are volunteers.
- We have our teachers agree to a code of ethical conduct.
- We conduct criminal background check and basic teacher training.
- We do our best to provide a safe, nurturing environment for our children. The playground equipment, however, is not supervised (unless used during the course of a class). Thus, children using the playground or playing on the grounds in general do so with parental supervision.
- We would appreciate your support in having your child attend the class to which (s)he is assigned. If, during the course of the year, there is a problem with your child in his/her class, please bring your concerns to your child's teacher or the Director of Religious Education.
- Please sign/date below to indicate that you have read the above.
- Any questions about the RE program may be brought to your child's teacher or the Director of Religious Education.

\_\_\_\_\_  
Signature/date