

2009-2010 Club 45 Registration Form

Child's Name: _____ Birth date: ___/___/___ ___ male ___ female

Address: _____ Zip Code: _____

Parent(s): _____ Email: _____

Phone numbers: (home) _____ - _____

Mother (work) _____ - _____

Mother (cell) _____ - _____

Father (work) _____ - _____

Father (cell) _____ - _____

Child's age: _____ Grade in School: ___ 4th ___ 5th School Name: _____

Known allergies: _____

Special needs/concerns we should be aware of? _____

EMERGENCY CONTACT INFORMATION:

1st person to call in case of emergency: _____ Phone: _____ - _____

If we can not reach you, other emergency contact: _____ Phone: _____ - _____

I understand that my child participating in the Club 45 program at St. Luke will place me in the volunteer rotation to help with meals and helping on Sunday evenings as needed during the quarter. *(All parents take a turn helping as needed and the average cost of the meal is \$20 per family.)*

- We would prefer to have **both** parents help when possible—it cuts down on frequency of times to volunteer in the rotation and it is especially nice to have dads helping as a good role model for the boys. **Please indicate below which parent(s) you would like us to schedule when it is your family's turn in the volunteer rotation:** _____ . *We do provide a nursery for younger siblings while you volunteer.*

If for any reason your family is not able to volunteer on a Sunday evening but you would like for your children to participate, then please speak to Carolyn Helms privately. Thanks!

We are striving for two sets of parents per week to help serve the meal and serve as leaders for the evening. If you would like us to place your family with another family in particular, please indicate the other family names here and we will try our best to make that happen. However, this is a new format we're trying which involves a great deal of scheduling, so please bear with us! ☺

Parent Signature: _____ Date: _____