

REGISTRATION FORM

PARENT/GUARDIAN INFORMATION

Parent/Guardian (1) _____

Address _____

Home Phone/Cell Phone _____ Wk Phone _____

Email Address _____

Parent/Guardian (2) _____

Address _____

Home Phone/Cell Phone _____ Wk Phone _____

Email Address _____

NAMES OF CHILDREN BEING REGISTERED

Do we have your permission to take your child(ren)'s photograph or video with or without voice to be used in a Towson UMC presentation or publication? ____ Yes/No

Is there anything else you would like us to know?

Parent/Guardian Signature _____

Date _____