

2024-2025 Christ Church of the Ascension
Registration Form for Children's Programs

Parent/Guardian Name(s) _____
Address _____
Home phone _____ Email _____

Name(s) of child/children:

Child _____ DOB: _____ Grade: _____ School: _____
Child _____ DOB: _____ Grade: _____ School: _____
Child _____ DOB: _____ Grade: _____ School: _____

Please indicate what activities and/or ministries your child is involved in:
 Sunday School
 Acolyte
 Nursery
 Children's Choir
 Youth Group

Would you like more information on programs available at CCA for Children, Youth, and/or Families?

Would you or your child be interested in being a Family Ministries volunteer? Please specify. (Sunday School, Youth Group, Acolyte Ministry, Family Events)

Does your child have any special needs that may require attention while s/he participates in our programs (allergies, etc.)? If so, please describe briefly.

Is there any other information that would assist us in working with your child?

Use of Child's Image: Please read carefully.

Unless you request otherwise, Christ Church reserves the right to exhibit and publish photographs of your child in internal and external communications including, but not limited to, the church newsletter, website, electronic communication, and social media. *Your child's name will not be published.* If you do not want your child's image used in these types of communications, please notify Shana Halpin in writing: shana.halpin@ccaaz.org.

Signature: _____ Date: _____

6th - 12th grades only: I give permission for my child to be driven by parish leadership. Yes No