



Arise Kids

2017 Fall Registration Form

Date: 9/23/17, 10/7/17, 10/21/17, 11/4/17, 12/2/17, 12/16/17, 6 Saturday nights

Time: 7:00pm - 9:00pm

Location: Arise Church (42828 Albrae Street, Fremont, CA 94538)

Children Classes are for Kindergarteners - 5th graders

Basketball: This class is for K-5th grade boys and girls who want to learn basic basketball techniques and competing in basketball games.

Jr. Chef: This class is for K-5th grade boys and girls who want to learn and explore more about cooking delicious food.

Child's First/Last Name	Grade (Fall)	Sex (M/F)	AriseKids Program selection
			1 st choice:
			2 nd choice

Arise church will try placing your child into your 1st choice first, but if the class is full, we will place the child to the 2nd choice selection.

Pre-K Program Child Name _____ Child Age _____

Nursery Child Name _____ Child Age _____

Class Registration Fee:

\$90 for a K - 5th grade child who registers the same class for 6 sessions with material cost

\$30 for a Pre-K child for 6 sessions and nursery is **Free**.

Registration Opens now (registration form, waiver/consent form, and fee)

Father's Name _____ Mother's Name _____

Address _____ Phone _____

Father/Mother Email _____

Liability/Wavier/Consent Form

I give Arise Church permission to take photos and videos of my child while my child participates in the Arise Kids children program. I give consent to Arise Church to use the videos and photos to be used in Arise Church promotional materials and website. I also give Arise Church permission to show Christian related videos or songs while my child participates in the class.

In the event of a medical emergency, I give the volunteer staff authorization to make emergency medical decisions for my child if I or the emergency contact cannot be reached. I waive any claims of personal injury and release Arise Church (church, staffs and volunteers) from any liability of the event.

Father's Name _____ Father's phone number _____
Mother's Name _____ Mother's phone number _____

Parent/Legal Guardian Print Name _____
Parent/Legal Guardian Signature _____ Date _____

General and Emergency Contact Information

Child's Name _____ Birthday _____ Age _____

Grade at school ____ Attend church Yes/ No If yes, church name _____
How do you know about this program? Attending Arise Church ____ Newspaper ____
Friends(Name)____ Relatives(Name)____ Website ____

Emergency Contact

Name _____ Phone # _____ Relationship _____

Name _____ Phone # _____ Relationship _____

Medical Health Insurance: Yes/ No
Insurance Carrier _____

Food Allergies or other medical or health needs: _____