



# Arise Kids

## 2020 Spring Registration Form

Date: 2/14, 2/28, 3/13, 3/27, 4/24, 5/8 Friday nights

Time: 7:30pm - 9:00pm

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

### Children Class is for Kindergarteners - 5th graders

**Ping-Pong:** This class is for K-5th grade boys and girls who want to learn basic Ping-Pong techniques and compete in Ping-Pong games.

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Child's First/Last Name	Grade (Spring 2020)	Sex (M/F)

### **Class Registration Fee:**

**\$60** for a K - 5th grade child who registers the same class for 6 sessions.

**Early Bird registration is \$50 by Feb 2nd.**

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

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Father Email \_\_\_\_\_ 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.

In the event of a result of an act of God, I waive any claims of cancel classes and release Arise Church from any responsibility.

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 \_\_\_\_\_ Language(s) spoken at home: English/Mandarin/Cantonese  
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: \_\_\_\_\_  
(If food allergies, please be very specific.)