



Arise Kids

2019 Summer Registration Form

Date: 6/28, 7/12, 7/19, 7/26 Friday nights

Time: 7:30pm - 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 (Spring)	Sex (M/F)	AriseKids Program selection
			1 st choice:
			2 nd choice:

Class Registration Fee:

\$40 for a K - 5th grade child who registers the same class for 4 sessions with material cost

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

Father's Name _____ Mother's Name _____
 Address _____ Phone _____
 Father Email _____ Mother Email _____

Parent volunteers in Class: No/Yes

If yes, circle dates 6/28, 7/12, 7/19, 7/26

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.)