



MCR Family Interactive Program

Registration				
Contact Name		<input type="checkbox"/> New Family	Date	
Address				
City		State		Zip Code
Phone		Email Address		
CCC Small Group		Refer by		

Family	
	Name
Parents	

Children (for 4 years old and up to join; babysitting service will be provided for siblings under 4 years old)
Please fill out all children in the family regardless their ages

Note: If your child has any food allergy, please be sure you mark it clearly what types of food he/she is allergic to. We will inform all teachers and helpers in his/her class, and a warning note will be posted in the classroom as a reminder. Please also let your child know about his/her food restrictions to ensure that he/she knows why snacks are not given to him/her.

INITIAL HERE

	Kid #1	Kid #2	Kid #3
Name			
Boy / Girl			
Birthday			
Doctor Name			
Doctor Phone			
Dentist Name			
Dentist Phone			
Food Allergy			
Special Needs			





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Family Emergency Contact			
Name	Relationship	Phone	Address

Lunch Fees for Aug to Nov 2009 Term			
	Name	Age	Fee \$5 per person per Sunday
Parents			\$
			\$
Children			\$
			\$
			\$
		Sub Total	\$ x 8 Sundays
<p>The fee will be \$5 per person per Sunday (adults and kids pay the same fees). Kids under 4 is free. There are 2 MCR programs per month—2nd & 4th Sundays. Lunch fees will be collected every term. For example, for a family of 3 (mom, dad, and 1 kid), lunch fees for each Sunday will be... \$5 (person) x 3 (people) x 1 (Sunday) = \$15 for each Sunday</p>			<p>Total for this term</p> <p>\$</p>

Payment			
Please make check payable to "Crosspoint Church"			
Amount Paid		<input type="checkbox"/> Cash	<input type="checkbox"/> Check #
Received By			Date

MCR registration form: page 2 of 3





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Waiver of Liability and Disclaimer

Permission to participate in the programs sponsored by Crosspoint Chinese Church is given for myself and/or child. In consideration of participation in this program, I hereby indemnify and hold harmless and release Crosspoint Chinese Church, its Leaders and Event Organizers, from any and all liability for injury suffered by myself or my child arising from or connected with this program, and I assume all risk for any injuries.

In the event of illness or injury and I cannot be reached, and the doctor or dentist listed cannot be reached, please call an available licensed physician/nurse or dentist or take my child to the nearest emergency facility by ambulance if necessary. I acknowledge that Crosspoint Chinese Church will not assume responsibility for the payment of medical fees or expenses incurred. I agree to release, indemnify, and hold harmless Crosspoint Chinese Church for any liability related to its babysitting services and children's programs which are provided for my child(ren).

Crosspoint Chinese Church may take and use photos or videos of your child(ren) for promotional purposes. I hereby grant the Crosspoint Chinese Church permission to use my child(ren)'s photos and videos in Crosspoint Chinese Church's promotional broadcast, telecast or print media of this event or activity free of charge.

Parent / Guardian

Full Name			
Child's Name			
Signature		Date	

