

Photo Release

Advent Church may use photos for church promotional use, with no name attached

Yes No

Initial Here _____

Children & Youth Ministry Family Information Card

Return completed card to the bin on the CYF Cart

Today's Date: ____/____/____

This card contains new information

Child _____ Date of Birth ____/____/____
Age _____ School: _____ Grade _____
Allergies/Special Needs _____

Child _____ Date of Birth ____/____/____
Age _____ School: _____ Grade _____
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Age _____ School: _____ Grade _____
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Child _____ Date of Birth ____/____/____
Age _____ School: _____ Grade _____
Allergies/Special Needs _____

Your Name(s) _____

Relationship _____

Cell _____ Email _____

Street Address _____

City _____ **Zip** _____ **Home Phone** _____

My child is connected to these other adults at Advent Church for check-in/out purposes:

Name Relationship Cell Number

Name Relationship Cell Number