

REGISTRATION FORM REDCO @ REDeemer COvenant Church Wednesday's at 6:30 PM (September-June) Grades K-6

Parent/Guardian (PLEASE PRINT)

FIRST NAME	LAST NAME		
EMAIL ADDRESS			· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS		APT	
CITY	STATE	ZIP CODE	
HOME PHONE	CEL PHONE		
HOME CHURCH			
Alternate authorized to pick child up from church	ו:		
NAME	Relat	ONSHIP	

Child's First Name	Child's Last Name	Age	T-Shirt Size*	Food allergies/sensitivities; medical or special needs and instructions

*T-shirt YOUTH sizes: small, medium, large, x-large

ADDITIONAL NOTES/INSTRUCTIONS: _____

The undersigned does hereby give permission for above children to attend and participate in REDCO Kids.

PHOTO PERMISSION: I give my consent to RCC to use photo or video images taken of my child(ren) in church brochures, advertisements for the church, on the website, in social media, and in other church publications as they see fit. I agree to hold harmless RCC from any liability which may result from the use of said picture(s). None of the photos to be taken will be for personal use.

LIABILITY RELEASE: In consideration of RCC allowing the above child(ren) to participate in RedCo activities, I, the undersigned, do hereby release, forever discharge and agree to hold harmless RCC, its directors, employees, volunteers and agents (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the above child(ren) while involved in RedCo.

Furthermore, I hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in activities involved therein. As well as releasing the child(ren) if necessary for transportation to and from the RedCo location. I do hereby release, forever discharge and agree to hold harmless RCC, directors, employees, volunteers and agents from any and all liability, claims or demands for accidental personal injury in the process of transportation.

MEDICAL TREATMENT PERMISSION: I authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child(ren) to this authorization.

Parent/Guardian Signature _	
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Date _____



VISIT US ONLINE!

For more info about RedCo, Redeemer Covenant Church and other available services, scan the QR code or go to MyRedeemer.com.



7565 Morgan Road, Liverpool, NY 13090 (315) 457-8887 Guest Wifi: FollowJesus2 | MyRedeemer.com | Email: *office@myredeemer.com* Like us on Facebook ♥ Follow us on Instagram ♥ Subscribe to our YouTube channel