

Cumming First United Methodist Church  
**AFTER SCHOOL**

The following are needed to complete your child/children's registration packet.

1. A Copy of your child's Certification of Immunization Form #3231 (only needed for children new to the program)
2. We use the *Remind App* which communicates important information to parents throughout the school year. Please provide one parent's cell phone number for that use.

Parent's Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

3. Emails are used as the primary means for communication and updates. Please provide one parent's email address.

Parent's Name: \_\_\_\_\_

Email: \_\_\_\_\_

4. Please list the parent's name that should be listed as the "Bill to" on the After School Tuition Account.

Bill To: Parent: \_\_\_\_\_

5. I hereby give permission for images of my child to be taken using video and/or photo and to be used solely for the purposes of Cumming First UMC After School promotional material, Social Media (private Face Book page) and publications, and waive any rights of compensation or ownership thereto.

Name of Participant (please print):

\_\_\_\_\_ Age: \_\_\_\_\_

Print Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_