

Unitarian Universalist Church of Bloomington/Normal Religious Education Registration for 2014-2015

Please list all children & youth who will attend, including those in the nursery (up to 2 years,) and preschool (3s and 4s).

	Name	Birth date	Grade or Nursery, Preschool
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____

Sr. High Youth	
E-mail	

Does your child have any special musical talents? If so, please describe

Please provide complete parent, guardian or other contact information.

Guardian #1

Name _____	Phone Numbers
Address _____	Home _____
City _____ ZIP _____	Work _____
E-mail _____	Cell _____

The best way to communicate: phone _____ **cell** _____ **email** _____

Guardian #2

Name _____	Phone Numbers
Address (if different) _____	Home _____
City _____ ZIP _____	Work _____
E-mail _____	Cell _____

The best way to communicate: phone _____ **cell** _____ **email** _____

Please list any special needs or information about any of your children such as **food allergies**, health conditions, learning challenges etc. of which we should be aware.

Does your child have an Individualized Education Plan (IEP) at school? Yes _____ No _____

To register children & youth, please complete both sides of this form.

Unitarian Universalist Church of Bloomington/Normal

Religious Education Registration for 2014-2015

Our Religious Education program runs like a congregational cooperative. The talents and efforts of all members and friends, parents and non-parents are needed to make it all work. Please check at least one task you would like to volunteer for in the coming year to ensure a quality program for our children.

Volunteer Opportunities

Please indicate which guardian is volunteering from the front information #1 or #2 or both.

_____ **Teaching – (circle choice) Preschool, K/1, 2/3, 4/5, 6-8, 9-12**

_____ **Substitute Teacher**

Special Talents

_____ **Help with Social Action Projects**

_____ Arts, Crafts

_____ **Help with Special Events**

_____ Building

_____ **Help with Social Events**

_____ Cooking, baking

_____ **RE Greeter**

_____ Music

_____ **Playground Watch**

_____ Sewing

_____ **Serve on the RE Committee**

_____ Storytelling

_____ Woodworking

Other skills/abilities you could contribute:

The child/ren listed have my permission to participate in UUBN RE activities on church grounds. In a medical emergency, the RE staff has my permission to obtain medical care for my child.

Signature of Parents/Guardians _____

Date _____

Questions? Contact Rev. Rosie Rimrodt at 828-0235 or revrosie@uubn.org

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