FAMILY REGISTRATION

LOCATION:	

PARENT/GUARDIAN INFO

Parent #1 /Guardian Name (First and Last)		Relationship to Child(ren)	Parent/Guardian #1 DOB (m/d/y)
Home Address			Home Phone
City	State	Zip	Cell Phone
Email Address			Do you want email updates from us? ☐ Yes ☐ No
Best phone # where can parent/guardian #1 can be reached while child is in this program:		Marital Status:	Do you attend LoveCanton? ☐ Yes ☐ No

Parent #2 /Guardian Name (First and Last)		Relationship to Child(ren)	Parent/Guardian #2 DOB (m/d/y)
Home Address			Home Phone
City	State	Zip	Cell Phone
Email Address			Do you want email updates from us? ☐ Yes ☐ No
Best phone # where can parent/guardian #2 can be reached while child is in this program:		Marital Status:	Do you attend LoveCanton? ☐ Yes ☐ No

Emergency Contact: Parents **cannot be listed** as emergency contact. List the name of one person who can be contacted in the event of an emergency or illness **if you cannot be reached.** Any person listed should be able to assist in contacting you. At least one person listed must be within one hour of this location and able to take responsibility for the child in case the parent/guardian cannot be contacted and should be at least 18 years of age. This person also has your permission to pick up your child(ren) in the event of an emergency. Drivers License Required for ID.

Emergency Contact Name	Best Phone #
Relationship to Child(ren)	

Pick Up Authorization: List the names of all people (other than those listed above) authorized to pick up your child(ren). Drivers License required for ID.

Name: _____ _____ Telephone # call 1st _____ Telephone # call 2nd

Relationship to child(ren):_____

Name: _____ _____ Telephone # call 1st _____ Telephone # call 2nd

Relationship to child(ren):_____

Media Release: I have been informed and understand, and grant permission to RiverTree, or its designees, that my vocal, musical, voice over, name, likeness, image, appearance, choreographic or dramatic presentation performance, may be recorded as part of audio, visual or audiovisual recordings, including but not limited to recordings and/or CDs, DVDs and audio or audiovisual digital files, radio and/or television broadcasts, and Internet broadcasts in all formats known or hereafter known. I agree that RiverTree is the sole owner of all rights to aforementioned recordings of my performances. I further agree that I will not assert any claim to any person or entity for royalties, residuals, or any other further compensation with regard to the making of the aforementioned recordings, and any exploitation (or public performances thereof) in all media, now or hereafter known (including broadcasts) without limitation. This agreement shall be binding on myself, my heirs, administrators, executors and assigns.

☐ Yes, I give permission for media release. ☐ No, I DO NOT give permission for media release.

"No Pictures" will appear on child(ren)'s name tag(s)

CHILD(REN) REGISTRATION INFO

This information helps us get your child(ren) into the correct class.

AGE/GRADES:	**BIRTH-5th GRADE**

List Each Child's Name (First and Last)	**Male / Female**	**Date of Birth** (m/d/y)	**Grade**	**School District**	**Allergies / Medical Concerns/Special Instructions** (This info will appear on the name tag)

FAMILY INFO

Please include any additional family members who have NOT already been included above.
This information just helps us easily serve and connect with your family.

Names of Family Members in Your Home (First and Last)	**Relationship to You**	**Date of Birth** (m/d/y)	**Does family member attend here?** Check any that apply		
			Weekends	**Kids/ Student Programs**	**No**

Privacy Policy: We won't send anyone knocking at your door and we will never sell, lease or rent your confidential information. We will always endeavor to take steps to assure that any information you provide will remain secure.

Parent/Guardian Signature:	Date: