



CHRIST THE KING CHURCH
Children's Choir
Registration Form

FALL 2018

If you prefer to fill out this form online,
please email me at ellen.estallo@gmail.com

Child's Name: _____

PARENTAL INFORMATION:

Father's Name: _____ Tel : _____

Address: _____

Email: _____

Mother's Name: _____ Tel : _____

Address (if different): _____

Email: _____

Guardian's Name: _____ Tel : _____

Address (if different): _____

Email: _____

Does your child have allergies or pertinent health conditions that we should know about?

EMERGENCY CONTACT:

Name: _____

Tel No: _____ **Relation:** _____

Your Child's Name: _____

Date of Birth: _____ Age: _____

School: _____ Grade : _____

Is your child involved in other musical activities (private lessons, school choirs, musical theater)? Note that involvement in other musical activities is NOT required.

Please check as applicable:

I understand and agree that photos/videos of my child may be taken during rehearsals/performances and used for CTK's promotional purposes:

_____ YES _____ NO

I agree to including my contact information in the choir directory:

_____ YES _____ NO

I would like to know more about being a parent volunteer.

_____ YES _____ NO

Please sign and print your name below, return to the parish office.

Signature

Name