UUSM RELIGIOUS EXPLORATION

REGISTRATION FORM FOR 2016-17

Please complete a separate registration for each child/youth you are enrolling.

Child/Youth Name	Birthday mm/dd/yy	Grade	Age	Gender	Service (Circle)	CW*
					9 11	

* for office use only

Parent/Guardian #1	Relationship to Child
E-mail	Church Member Yes No
Street Address	
Home Phone	
Preferred contact methods: ☐Email	il □Home Phone □Cell Phone Call□Text □USPS □Facebook
Parent/Guardian #2	Relationship to Child
E-mail	Church Member YesNo
Street Address	
Home Phone	
	il □Home Phone □Cell Phone Call□Text □USPS □Facebook

STUDENT INFORMATION

What do we need to know in order to help your child have a positive and safe RE experience? (Food allergies, special needs, learning style, strengths/special interests, religious/family background, etc.). Please give details or speak with the DRE; information will be kept confidential between your child's RE teaching team& the DRE.

VOLUNTEER COMMITMENT

Our program is possible because of the volunteer commitment of our congregation's members. As parents/guardians of enrolled participants, we need your active support! UUSM religious exploration is funded through your pledge to the congregation; we do not charge fees for participation in our programs. In order to ensure its success, those who have children in our religious exploration program will be **asked and expected** to contribute some of your time to RE. Please select at least one way for each parent/guardian in which you would be willing to volunteer to help make all the parts of our program run smoothly. We ask that each parent volunteer a minimum of four times per year.

	laking a choice below is not a set-in-stone commitment; it is the beginning of a conversation. The DRE or a ember of the Lifespan RE Committee will follow up with you to discuss your participation. Thank you!
	I am already signed up to teach an RE class in 2015-2016-or- I am interested in volunteering to teach 1-2 Sundays per month in K-2 nd Grade / 3 rd -5 th Grade (9) / 6 th -8 th Grade (9) / Multi-age Workshop (11)
	Classroom Assistant (1 Sunday per month)
	 Circle choice: Nursery / Preschool / K-2ndGrade / 3rd-5th Grade Circle choice: I prefer 1st 2nd 3rd 4th Sundays
	RE Family Event Coordination (parties, potlucks, game nights, etc.)
	Parent Event Coordination (book discussion group, support group, parents' night out, etc.)
	Faith in Action for RE Children/Youth (help coordinate FIA projects in RE; generally on the 4 th Sunday of the month)
	Helper Elves (help prep supplies or snacks for classes, set up or cleanup for events, etc.)
	Administrative Help (I can give hours per, to be scheduled with DRE. These days/times of the week are best for me:)
	Please call me so we can discuss how I might design my participation in a way that works for me.
\mathbf{N}	IEDIA PERMISSION (please check appropriate box below)
to	s part of our Religious Exploration Program we sometimes take photographs and videos of children in ction as they participate in classes or special events so we can share the good news about what UUSM has offer to members and newcomers on our website, in our newsletter, and in person. We need your ermission to publish images of your children in any way. With any use of these images, names and her personal information will <u>NOT</u> be included.
	I give permission for images of my child to be used for all of the above purposes (church website, etc.)
	I give permission for images of my child to be used only in communications that will only be seen by members and friends of UUCCSM (newsletter, teacher training presentations, etc.)
	I do not want images of my child to be used in any church publications.
I	PARENT CONSENT INFORMATION
***************************************	By enrolling my child in this RE Program, I affirm its goal of inspiring and guiding the personal, ethical and spiritual development of our children and youth within the context of our Unitarian Universalist faith. I understand that religious exploration is a cooperative venture, and that as a parent I am my child's primary religious educator. I also understand that the RE Program of UUSM is made possible by the volunteer commitments of its members, and that I will be asked to contribute some of my time this year to the RE Program. In the event of a medical emergency, the RE staff has my permission to treat and/or transport my child if
I	My child has permission to participate in any walks or nearby trips that are planned as part of the Sunday
İ	Morning Religious ExplorationProgram, provided that he/she is under adult supervision and I am notified in advance if they are to leave church grounds.
İ	Parent Signature Date