

# 2010 - 2011 PUUC RE Registration

## & Parent Volunteer Sign Up Form (Parental Involvement is an Important Expectation)

*Please fill out  
both sides*



### Please Print in Blue or Black Ink

Please list all children you are registering including children in Nursery and Preschool program:

First & Last Name	Birthdate	2010 - 2011 School Grade	Sex	Email address of Middle School or Senior High youth
1 _____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____

### Family Data:

Parent A \_\_\_\_\_ home phone \_\_\_\_\_ cell phone \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail \_\_\_\_\_ In what religion were you raised? \_\_\_\_\_

Parent B \_\_\_\_\_ home phone \_\_\_\_\_ cell phone \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail \_\_\_\_\_ In what religion were you raised? \_\_\_\_\_

Communication should be to: Parent A \_ Parent B \_ Both \_\_\_\_\_

### Allergies / Special Needs / Health Concerns:

List all special needs including any health conditions and / or allergies to food, bee stings, and medications. Please remember to keep us informed throughout the year.

\_\_\_\_\_  
\_\_\_\_\_

### Medical and Photo Release Form/ Activity Permission

I voluntarily waive any claim against PUUC, leaders, and chaperones for any and all causes which may arise in connection with the activities of PUUC. If, during such activities, I cannot be reached in a timely manner in an emergency, I authorize the leaders / chaperones in charge to act on my behalf, including obtaining medical care, and I agree to pay or have paid any fees or charges related to such care. Yes \_\_\_\_\_ No \_\_\_\_\_

I give permission for my child's photo to be taken and displayed in the building and/or used in publicity for the church. Yes \_\_\_ No \_\_\_

My children listed above have my permission to participate in special youth events during the 2010-2011 year. This includes activities that require travel, class parties, retreats and other programs Yes \_\_\_ No \_\_\_

Parent / Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**PUUC Religious Education Volunteer Needs**

*Please fill out both sides*



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both sides*



It takes a lot to run a R.E. program. The depth and diversity of our religious education program is shaped in large part by your involvement. Please share your time and talents!

## ***Our Program is cooperative – We can't do it without YOU!***

There are many opportunities to use your strengths and talents in our community.

### **Parent/Guardian A**

Name \_\_\_\_\_

Phone \_\_\_\_\_  
(work/cell) (home)

E-mail \_\_\_\_\_

**I am willing to help by** (please check two or more):

- Serving on the RE Council
- Teaching an RE class 2x a month
- Working with Middle/High School Youth
- Substitute/Assistant Teaching 4 times/year
- Working in nursery/toddler room 1X a month
- Supervising playground after Sunday Service
- Help with Social Justice Sundays
- Planning parties and special events
- Helping with art, drama, creative activities
- Set up/maintain PUUC RE web page
- Becoming an Our Whole Lives (O.W.L.) facilitator
- Being a Coming of Age mentor
- Organizing books/ supplies, helping office staff
- Provide transportation/accompany youth on trips
- Phoning volunteers
- Preparing food for special events
- Sharing my skill: \_\_\_\_\_

Comments or suggestions

### **Parent/Guardian B**

Name \_\_\_\_\_

Phone \_\_\_\_\_  
(work/cell) (home)

E-mail \_\_\_\_\_

**I am willing to help by** (please check two or more):

- Serving on the RE Council
- Teaching an RE class 2x a month
- Working with Middle/High School Youth
- Substitute/Assistant Teaching 4 times/year
- Working in nursery/toddler room 1X a month
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- Sharing my skill: \_\_\_\_\_

Comments or suggestions

**Thank you !!**

*Please fill out both sides*

