

CEC FAMILY Registration Form

2011 - 2012

Return completed forms to a Sunday School Teacher, the Christian Ed or Parish Office.

Family LAST Name: _____

Home Address: _____
Street Number City Zip Code

Home Phone: _____ Family Email: _____

Parent's Names: _____

Cell #: _____ Work #: _____

Cell #: _____ Work #: _____

Preference for delivery of information to you and your family:

Email _____ Email address _____

Phone Call _____ Preferred # _____

US Mail _____ Note I do NOT communicate by email _____

Would you like to be included in any of the following via email?

_____ ARK (Children's Monthly Newsletter & Calendar)

_____ Youth Happenings (Youth Monthly Newsletter & Calendar for those in 6 - 12th Grades)

_____ TGIFS (Together Growing In Faith Sundays - Newsletter & Activities for Families with Young Children)

_____ Nursery News (For families with Children 0 - 4 years old)

_____ Friday Family FUN Nights (Quarterly Gatherings for Families with Children of All Ages) Are you a

Are you a Member of Christ Episcopal Church? Yes _____ No _____

If not, would you like information about joining the church? Yes _____ No _____

Child's Name _____ Age today _____

Child's Name _____ Age today _____

Child's Name _____ Age today _____

Also interested in:

- | | |
|---|---|
| <input type="checkbox"/> Singing in the Choir
___ Choristers ___ Teen Choir | <input type="checkbox"/> Attend Weekly Bible Study |
| <input type="checkbox"/> Being in Youth Group
___ Jr High (6 - 8) ___ Sr High (9 - 12) | <input type="checkbox"/> Attend Mothers Morning Out |
| <input type="checkbox"/> Youth Workcamp / Heifer Farm Work Trips | <input type="checkbox"/> Family or Youth Community Service Projects |
| <input type="checkbox"/> Baptism | <input type="checkbox"/> Attend Quarterly Family Fun Nights |
| <input type="checkbox"/> Communion Instruction (3 rd grade or older) | <input type="checkbox"/> Work on Altar Guild |
| <input type="checkbox"/> Confirmation (should be in 9 th grade or above) | <input type="checkbox"/> Family Ski Trip/Work Trip/ Camping Trip |
| <input type="checkbox"/> Being an Acolyte (6 th grade or older) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Being a Lector | _____ |
| <input type="checkbox"/> Being an Usher (families welcome) | |
| <input type="checkbox"/> Helping w/ Special Events | |
| <input type="checkbox"/> Volunteer at Bargain Box (families welcome) | |

Contact Michele Craig, Director of Children's & Youth Ministries, with any questions or concerns:
301/762-2191 #15, or mcraig@cccrockville.org

I/we give my permission for the above named child/youth to participate in Christ Episcopal Church's Christian Formation program. I/we understand that I/we are **required to remain on the church grounds** while my/our child/youth attends Sunday morning programs, if they are under the age of 16 or prior arrangements have been made in writing.

Parent/Guardian Signature

Date

Occasionally we photograph children/youth at Christ Episcopal Church and use the photos, without identifying children/youth by name, in our publications or on our website. Please indicate below:

_____ **Yes.** You may use photos in publications or on the web site.

_____ **No.** Please do not use photos of my child/youth.

Parent/Guardian Signature

Date

If child/youth divides time between two households, please complete:

_____ Please send info about Children's & Youth Ministries.

Name: _____

Mailing Address: _____

Home #: _____ Cell #: _____

Email address: _____

List people other than parents/guardians **who are allowed** to pick-up your child/youth from Sunday programs (grandparents, siblings, etc).

**We are asking that each family give at least two
Sundays to our Children's & Youth Ministry programs.**

What would you like to be involved in?

- Sunday School Teacher – Note teachers work in teams and are not required to teach every week. Training is available. No experience necessary.
- ___Preschool
___Kindergarten/First Grade
___2nd & 3rd Grade
___4 - 6th Grade
___7th - 9th Grade
- Volunteering to assist in a class _____Grade?
- Children's Church Supply Closet/Christian Ed Room Angel
- Working on Seasonal Events
- | | |
|---------------|---------------------------|
| Advent_____ | Nativity Pageant_____ |
| Epiphany_____ | Jesus' Birthday_____ |
| Lent_____ | Community Service_____ |
| Easter_____ | Teacher Appreciation_____ |
| Year End_____ | Family Movie Night_____ |
- I can help in another way_____

Your NAME:_____

Phone #:_____ **Email:**_____

THANKS for your cooperation!