

**ZION EVANGELICAL MISSIONARY CHURCH**  
**SUNDAY SCHOOL SEPT 2020 – JUNE 2021**

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**GENERAL INFORMATION**

Family Name \_\_\_\_\_ Parent(s)/Guardian Names \_\_\_\_\_

1) Child's First Name: \_\_\_\_\_ Gender (M/F): \_\_\_\_ Grade in the fall: \_\_\_\_\_  
Birthday: (M/D/Y): \_\_\_\_\_  
Allergy information/Other: \_\_\_\_\_

2) Child's First Name: \_\_\_\_\_ Gender (M/F): \_\_\_\_ Grade in the fall: \_\_\_\_\_  
Birthday: (M/D/Y): \_\_\_\_\_  
Allergy information/Other: \_\_\_\_\_

3) Child's First Name: \_\_\_\_\_ Gender (M/F): \_\_\_\_ Grade in the fall: \_\_\_\_\_  
Birthday: (M/D/Y): \_\_\_\_\_  
Allergy information/Other: \_\_\_\_\_

**CONTACT INFORMATION**

Home Phone #: \_\_\_\_\_ Cell # \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Other: \_\_\_\_\_

Which # should be tried first? \_\_\_\_\_

Email: (Optional) \_\_\_\_\_

**MEDICAL WAIVER AND RELEASE**

I hereby release Zion Evangelical Missionary Church of any legal or financial responsibility in case of accident or injury of my child while he/she is involved in any of the activities sponsored or coordinated as part of Sunday School program. This may include, but is not limited to, transportation and activities during Sunday School time. I understand that a program of this nature involves risks, including the possibility of personal injury. I give permission to the staff to administer medical treatment if deemed necessary. Further, I give permission for treatment to be given by a doctor in case of a medical emergency involving my child. All information I have given is complete and accurate to the best of my knowledge.

Parent/Guardian Name (please print clearly): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **BEHAVIOR POLICY**

Sunday School is an exciting and fun place to be, especially if everyone follows the rules. Our basic rule for all those in attendance can be summarized in one word. RESPECT. This means: respect leaders, respect yourself and team-mates, and respect the property.

In the event that behavioural issues arise, please see the following disciplinary steps which will be taken.

- Concerns will be discussed with the child
- Expectations will be clarified to make sure the child knows that behaviour change is expected
- The child may be asked to sit out of an activity
- The child will be brought to the Sunday School Director
- Communication will be made with the parents, in person or by phone.
- If problems persist, the child will be sent home

### **Coronavirus Considerations:**

- We will endeavour to follow the Government of Alberta Guidelines for Sunday School found at [open.alberta.ca](http://open.alberta.ca)
  - I/we agree to check my/our child(ren)'s temperature on Sunday mornings and keep my/our child(ren) home if they exhibit any Covid symptoms, have travelled internationally in the past 14 days, or been in close contact with a confirmed Covid case in the past 14 days.
  - I/we agree to be available to immediately pick up my/our child(ren) if they exhibit any Covid symptoms (fever, cough, runny nose, sore throat, upset stomach) during the program.
  - I give permission for my/our child(ren) to use hand-sanitizer. Initial \_\_\_\_\_
- Should a case of Covid be connected to Sunday School program, I/we agree to give access to the Government of Alberta to attendance records for the purpose of contact tracing.

## **PICTURES AND VIDEO**

Please know that photos and videos will be taken during Sunday School and may be used for future promotional or celebratory use. Initial \_\_\_\_\_

I have read, agree with, and have discussed the behaviour policy with my child(ren) listed on this registration form.

**Parent/Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Questions?**

**please give us a call at 780-941-3923 or email [zemc@airsurfer.ca](mailto:zemc@airsurfer.ca)  
Zion Evangelical Missionary Church**