



# Kids for Christ (KFC) Registration

## Kindergarten thru 4<sup>th</sup> grade

Please complete the following form and return to  
**Marshall First United Methodist Church**  
702 Plum St  
Marshall, IL 62441  
*Form can be turned in when child attends*

Child's Name: \_\_\_\_\_ (One form per child please)

Grade: \_\_\_\_\_ Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_

Parent's/Guardian's Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Church: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

Food Allergies:  Yes  No - If yes, list: \_\_\_\_\_

Medical Concerns:  Yes  No - If yes, explain: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Doctor's Phone: (\_\_\_\_\_) \_\_\_\_\_

Person(s) Name(s) Who May Pick up the Child:

1. Name: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Transportation will be provided by the Marshall School District **to** KFC. Children will need picked up from Marshall First United Methodist Church at **5:00 p.m.** If your child needs to leave early or is walking home, please send a note with your child.

Kids for Christ (KFC) leaders have permission to photograph/film the minor(s) designated above for any lawful purpose associated with this program.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_