



At St. Mary Church
Sundays during the 10:30am Mass

Registration Form

Date: ___ / ___ / ___

Child's Name: _____ Nickname: _____
Date of Birth: _____ Age: _____ Gender: M or F [Circle one]

Child's Name: _____ Nickname: _____
Date of Birth: _____ Age: _____ Gender: M or F [Circle one]

Parent or Guardian information:

Name: _____
Address: _____
Cell phone #: (1) _____ (2) _____
General pew location: _____

Bottle

Next feeding time: _____ Bottle instructions: _____

Diaper Change

Do you want your child's diaper changed? Yes or No [Circle one]

Snack

Do you want your child to have a snack (animal crackers or goldfish)? Yes or No [Circle one]

Allergies

Does your child have food or other allergies that we should be aware of? Yes or No [Circle one]
If **Yes**, please describe symptoms and exactly how we should respond:

The following adults have permission to pick up my child from the nursery:

Name: _____ Relationship: _____
Name: _____ Relationship: _____

PROPER ID REQUIRED!!

Media and Photo release authorization

I hereby give permission for St. Mary's to use photographs (without the child's name) in St. Mary's bulletins, brochures, website and news releases in regard to any St. Mary's sponsored event or activity.
Yes or No [Circle one]

Please pick up your child immediately follow the Mass. Do not leave the parish property while your child is in St. Mary's nursery care.

Parent/guardian signature: _____ Date: ___ / ___ / ___