DUMC Children's Registration
2025/26
Davis United Methodist Church
1620 Anderson Road, Davis, CA 95616

At DUMC, we want to provide a safe and loving environment where your child can learn and worship! Please answer the following questions so we can successfully assist your family. Our Children's Ministry leaders will respect your family's right to privacy and only share the information below with Sunday School teachers and care providers on a need to know basis.

General Information
Parent/Guardian 1:
Name: _____
Preferred Pronouns: _____
Family Street Address: _____
City: _____ Zip: _____
Email: _____
Cell Phone: _____

Parent/Guardian 2:
Name: _____
Preferred Pronouns: _____
Family Street Address:
(If Different than listed above) _____
City: _____ Zip: _____
Email: _____
Cell Phone: _____

Child(ren) Names:			
Birthdate			
Grade			
School			
Preferred Pronouns			

Are you or your child interested in being baptized? (circle one)
Yes   No   Already Baptized

Program interest: (Circle all that apply)

Sunday School   Children's Choir   Service Projects

Infant/Toddler programming

Medical Information:

Does your child have any medical condition or diagnosis that would be helpful for staff to be aware of? (ADHD, Autism, Diabetes, etc.).

_____

Does your child(ren) have any food allergies?

_____

Are any of these allergies life threatening? YES or NO

PHOTOGRAPHY Permission

I, _____ (parent/guardian)
 o give permission for my child(ren) to be photographed

 o DO NOT GIVE permission for my child(ren) to be photographed

while participating in DUMC events with the understanding that the photos will not be posted beyond the church without additional permission.

Signature of parent/guardian _____

Medical Release
In the event of an emergency, if a parent/guardian cannot be contacted, I hereby authorize emergency treatment to be administered.

Physician Name: _____
Phone Number: _____
Medical Insurance: _____
Policy Number: _____

Emergency Contact: _____
Relationship: _____
Phone Number: _____

Signature   _____
Date   _____