



Truth Trackers / Tiny Trackers 2019-2020 Registration Form

Child's Name _____ Home Phone: _____

Father's Name _____ Mother's Name _____

Address _____ City _____ ZIP _____

Preferred Email _____

Age: _____ Birthdate: _____/_____/_____ Gender: _____ Grade: _____

School: _____ Church: _____

On Sunday evenings, parents can be reached at (phone): _____

Person to contact if parent(s) cannot be reached:

Name: _____ Phone: _____ Relationship: _____

Doctor's Name: _____ Phone: _____

Medical Insurance: _____ Group#: _____ ID#: _____

Specific health conditions or allergies: _____

Medications: _____

I (we) give permission for photos of my child to be used in the end-of-year ceremony.

Please initial: Yes _____ No _____

As parent(s) or guardian(s), I (we) hereby give permission for my child (named above) to attend Truth Trackers/Tiny Trackers activities and outings of Desert Foothills Baptist Church, Tucson, Arizona. In the event of an accident or injury, I will not hold Truth Trackers, Desert Foothills Baptist Church, or individual ministers or leaders responsible. I do herewith authorize treatment and transportation by qualified medical personnel of the above named minor in the event of a medical emergency which, in the opinion of the attending medical personnel, may endanger his/her life, or cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted after a reasonable effort has been made to reach me.

Parent/Guardian Signature: _____

Relationship to child: _____ Date: _____

Desert Foothills Baptist Church, Tucson, Arizona 08/2019

Paid: _____ Date: _____