OBUUC

| Religious Education: | Date | |
|----------------------------|----------|--|
| Significant Adult Name(s): | Pronouns | |
| Address: | | |
| Main Phone and/or Cell: | | |
| Email Address(es): | | |

Please fill out the chart below for every child in your family.

| First/Last Name & Pronouns of Child | Birthday MM/DD/YY | Current Grade Level or age | Allergies/Special Needs* |
|--|----------------------|----------------------------------|--------------------------|
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All children and teens attending Sunday RE, nursery, or a RE-sponsored event must have a responsible adult in attendance.

Do you give consent for your child's photo & video image to be taken during activities in our RE Program? Yes No

Do you give permission for those images to be used on bulletin boards, newsletters, church email or in the sanctuary? Yes No

Do you give permission for those images to be used on the church website? Yes No

Do you give consent for your child(ren) to participate in all RE activities (including occasional outdoor activities) with adult supervision? Yes No

To keep each other healthy we recommend that children participating in Religious Education are up to date on vaccinations.

If a child or a child's household member is experiencing Covid-19 symptoms, a Positive Covid19 test or Covid exposure, all household members should refrain from attending OBUUC.

*Optional: If your child has allergies or special needs, would you like the DLRE to contact you for further discussion? Yes No

Child and Youth Participation Release

I, who have provided my name on the reverse side of this document as the guardian, represent that I am the parent or legal guardian of all the minors listed on the reverse side of this document, and I grant permission for such minor(s) to participate in the Religious Education programming of Olympia Brown Unitarian Universalist Church.

I agree and hereby do release and hold harmless Olympia Brown Unitarian Universalist Church of Racine Wisconsin and/or any and all supervisors, teachers, volunteers, or employees for the activities of the Religious Education program, from and for any and all liability which may arise for damages, loss or injuries, either to person or property, which the minor may sustain while engaging in the activities conducted, except as to such injuries or damages arising from the intentional conduct or the sole negligence of OBUUC and/or its supervisors, teachers, volunteers, or employees, except that this release shall not apply to any damages, loss or injuries covered by liability insurance of OBUUC. I further agree to assume responsibility for any liability which may arise for damages, loss or injuries, as described herein which may be caused or contributed to by the minor to the person or property of others.

| Parent or Guardian's Signature | Date | |
|--------------------------------|------|--|
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| | | |
| DLRE or Designee's Signature | Date | |
| | | |

This registration form was reviewed and updated as needed:

| Parent or Guardian's Signature | [| Date |
|--------------------------------|---|------|
| Parent or Guardian's Signature | | Date |
| Parent or Guardian's Signature | I | Date |
| Parent or Guardian's Signature | I | Date |
| Parent or Guardian's Signature | I | Date |
| Parent or Guardian's Signature | I | Date |
| Parent or Guardian's Signature | I | Date |
| Parent or Guardian's Signature | [| Date |