



# Checkpoint Registration

Registration process is reserved for families that intend to place their children in Bible study or weekly programs on a regular basis. Family information is entered into our database for the purposes of generating security badges, mailings, and attendance. Please notify us of any changes to allow us to keep your family records accurate. Thank you!

## Parent(s) Contact Information (please print clearly):

### *Father/Legal guardian:*

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home phone: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

### *Mother /Legal Guardian:*

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home phone: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

### *Children's Information: Please list ALL children living in your household (preschool through high school)*

First name	Last name	Birthdate	Gender	Allergies/Medical conditions	Class/Grade
_____	_____	____/____/____	M F	_____	_____
_____	_____	____/____/____	M F	_____	_____
_____	_____	____/____/____	M F	_____	_____
_____	_____	____/____/____	M F	_____	_____
_____	_____	____/____/____	M F	_____	_____
_____	_____	____/____/____	M F	_____	_____

**Emergency Cell Phone** (will appear on your child's security tag): (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Family Barcode number:**

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**Registered Card Name:** \_\_\_\_\_

### *Other Family members/relationships—authorized pickup for your child (must be in our database):*

First name	Last name	Phone Number	Relationship to child
_____	_____	_____	_____
_____	_____	_____	_____

**For office use only:** Date received: \_\_\_\_\_ Date completed: \_\_\_\_\_