

Registration and Release for **Weekday Religious Education**

| CHILD Info | | | | PARENT/GUARDIAN Info | | | |
|------------------------------|---------------------|-------------|---------------|----------------------|----------|---|------|
| Child's Name | | | | Name | | | |
| Birth Date | | | | Day Phone | | | |
| Age | | | | Evening Phone | | | |
| Gender | | | | Cell Phone | | | |
| Address | | | | Email | | | |
| School | | | | Emergency Contact | | | |
| Grade | | | | Emergency Phone | | | |
| Teacher | | | | Emer. Relationship | | | |
| T-Shirt Size (Circle One) | Youth: YXS (2/4) | YS (6/8) | YM (10/12) | YL (14/16) | Adult: S | M | L XL |

Special medical needs: _____

Parent / Guardian's signature: _____

It is understood that this child will be transported from the school premises by bus for up to 1 hour per week. SHES students will meet at Strasburg Presbyterian Church, WWRE students will meet at Woodstock Church of the Nazarene, and the HRES students will meet at the Yellow Barn.

Photo Use Agreement

_____ (name) may be photographed and or videotaped during activities of WRE classes. This photo release gives the **Weekday Religious Education** organization permission to photograph your child and release said photos for publication both online and/or in print media. I understand that photographs and videos may be used to promote the program.

Parent/Guardian's name (print): _____

Parent/Guardian's signature: _____

Date: _____

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I do **NOT** want any pictures of my child, namely _____ child/youth posted in any public forum without my express permission.

Signed (name of parent/guardian) _____

Print name _____

Date _____



Please return to SCWREA, PO Box 634, Woodstock, VA 22664
Weekday Religious Education will follow whatever closures are made by SCPS.

<https://weekendreligiouseducation.com>
<https://www.biblebreak.org/>