

LOGOS REGISTRATION 2009-2010

Last Name: _____

NAME of Child	GRADE	BIRTHDAY	ALLERGIES? (food, medications, bee stings, etc.)	School	Fee
					\$60
					\$60
					\$50

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact Name/Phone: _____

In case of medical emergency, the LOGOS personnel are authorized to take my child to the hospital for emergency care.

Signature of Parent/Guardian: _____ Date: _____

First Presbyterian Church Member? (circle one) Yes No

Parent Commitment – In order to participate in LOGOS, a commitment by a parent is required. A job will be assigned depending upon our needs. Please circle any that you would be interested in doing. Thank you!

- | | | |
|-----------|--|---------------------------------|
| 4:10 | Van Driver to pick up LOGOS kids | <u>During Week</u> |
| 5:30-7:45 | Childcare/Nursery | Donate Special Food Items |
| 5:00 | Music/Worship Assistant | Make dessert |
| 5:00 | Youth Assistant w/recreation, music, and/or mission activity | |
| 4:30 | Recreation Helper | Publicity (Photographer) |
| 6:00 | Table Parent for Preschool or High School | Wash table cloths |
| 6:30 | Kitchen Clean Up Helper | Update LOGOS webpage (pictures) |
| 6:45-7:45 | Bible Study Assistant | Make bulletin board for LOGOS |

Do you need help with transportation to LOGOS for your child? _____

(If yes, please fill out attached transportation request form.)

Number of children needing transportation. _____.

I will need Nursery care during my commitment to LOGOS for:
 Name/Age: _____

Registration Fees Paid: \$ _____ (first half) Remaining payment \$ _____ (2nd half due Nov. 1)

\$ _____ (Paid in full)

_____ Need financial assistance. We are able to pay \$ _____

1 Child	= \$60
2 Children	= \$120
3 Children	= \$170
4 Children	= \$220