

Unitarian Universalist Church of Indianapolis
2009-2010 Church School Program – Registration Form

Children/Youth Names (First and Last):

_____ Birth date _____ Grade ____ Allergies _____
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_____ Birth date _____ Grade ____ Allergies _____
_____ Birth date _____ Grade ____ Allergies _____

Parent/Guardian Name _____ Home Phone _____

Address _____ Work Phone _____

City and Zip _____ Cell Phone _____

Email address – ***Please Print Carefully*** _____

Parent/Guardian Name _____ Home Phone _____

Address _____ Work Phone _____

City and Zip _____ Cell Phone _____

Email address – ***Please Print Carefully*** _____

Emergency Contact: _____ Phone: _____

*******Junior and Senior High Youth Group Email*******

If your child has an email address, please ***carefully print*** it on the lines below.

First Name _____ Email _____

First Name _____ Email _____

Emergency Contact _____ Home phone _____ Cell phone _____

What would you like us to know about your child(ren) that would help him/her in a church school environment? Is there any information that would be helpful for teachers? Is there anyone who is precluded from picking up your child?

Who has custody of your child? _____

Who is authorized to pick up your child? _____

Is there anyone who is precluded from picking up your child? _____

Dear Parents,

Our ministry with children and youth is a cooperative endeavor and we rely on the contributions of help and support from parents and other adults. Safety of our young people is of paramount importance. We ask that you read and sign the following, adopted nationally by UU Congregations.

Code of Ethics Statement for Volunteers

The relationship between young people and their leaders is based on mutual respect. As an adult in a leadership role, I will provide for the nurture, care and support of the children and youth. I will refrain from engaging in behavior that is harmful to their physical, emotional or spiritual development. I affirm that there is nothing in my background that would call into question my being entrusted with the supervision, guidance and care of children and youth.

I affirm that I have never been convicted of or pled guilty to any sexual crime. I also have not pled guilty to a lesser charge after having been charged with a sexual crime. I have never engaged in any form of child abuse, including sexual abuse. I have never been determined to have engaged in any sexual offenses in any civil, administrative, or ecclesiastical forum or other forum.

If there are any facts or circumstances in my background that call into question my being entrusted with the supervision, guidance, and care of children, youth, or vulnerable adults, I have met to review this information confidentially with the professional religious educator.

Further, I agree to notify the religious educator or other ministerial staff immediately should I be accused of sexual abuse, sexual offenses, sexual harassment, or other sexual improprieties in the time that I am working with children and youth in this congregation. I understand that the ministerial staff makes the final determination for volunteer placement.

I understand that to protect the children and youth, myself and this congregation, that there must be a minimum of 2 adults with any child at all times, and that this congregation maintains an open door policy.

Signature (Parent 1) _____

Signature (Parent 2) _____