

# COMMUNITY DAY PROGRAM

REGISTRATION CHECK IN & CHECK OUT FORM WEEK OF JUNE 29TH, 2020

Child's Name:

\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_

Check in Time

Check Out Time

MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	NO DAY PROGRAM JULY 4TH HOLIDAY

\_\_\_\_\_ Phone # \_\_\_\_\_  
\_\_\_\_\_ Phone # \_\_\_\_\_  
\_\_\_\_\_ Phone # \_\_\_\_\_  
\_\_\_\_\_ Phone # \_\_\_\_\_

As a Parent or Guardian of Child(ren) named above I accept the conditions of enrollment and give permission for my child(ren) to participate in the 2020 Community Day Program at First Baptist Church of Clarks Grove. I understand that my child(ren) may be walking to local parks. I authorize my child to walk to local parks and I have read the rules and regulations and understand them. I agree to the rules and regulations and my child will adhere to these rules. I/We understand and agree to use the electronic check in/Check out system and those not listed above will not be allowed to check out your child(ren). **I Understand there are risks of due to the Covid-19 Pandemic and will sign the Covid -19 Waiver or my child(ren) will not attend. I also agree to have my child(ren) temperature taken each morning before sign in. Temperatures over 99.8 will not be allowed to attend.**

I/We, the undersigned, release FBC Clarks Grove and any of its authorized agents from any obligation or liability, actual or implied, concerning Community Day Program or said outings.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_