



2024-2025 KidsQuest REGISTRATION FORM

Dassel

PARENT/GUARDIAN INFORMATION

Parent/Guardian: _____ Relationship to child: _____

Parent/Guardian: _____ Relationship to child: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

Do you have a church home? Yes No If yes, Name of church: _____

I/We, the undersigned, give Dassel KidsQuest permission to seek emergency medical services if necessary and will not hold Dassel Covenant Church liable for any illness or mishap that may occur during KidsQuest. I/We also give the KidsQuest leaders full authority in dealing with problems of discipline. Anyone disregarding KidsQuest rules is subject to being sent home. Those who willfully destroy property will be held responsible and charged accordingly. I/We agree that Dassel Covenant Church may use comments, photos/videos related to KidsQuest for publicity and promotional purposes.

In case of emergency, please notify: _____ Phone: _____

Children's Family Doctor/Hospital: _____

Parent/Guardian signature: _____ Date: _____

CHILDREN ATTENDING KidsQuest

	Child's Name	Birthdate	2023-2024 School Grade (if applicable)	Allergies/Behavioral & Special Needs (please explain)
1				
2				
3				
4				

School Pick Up Authorization

I authorize Dassel Covenant Church to pick up my child/children, _____, from _____ school on Wednesday's when KidsQuest is in session.

I will contact my child's school and give permission to Dassel Covenant Church to pick my child up from school.

I will contact Dassel Covenant Church if my child will not be attending KidsQuest and in turn, not need a ride.

Parent/Guardian: _____

Signature: _____ Date: _____

RETURN TO DASSEL EVANGELICAL COVENANT CHURCH. THANK YOU!