



Kids Link



Greenwood Community Church

Thank you for enrolling your child in the Children's Ministry.
Please complete this card in full and return it to Kid's Check In.

Child's Information

Child's Name _____ D.O.B. ____/____/____

Child's Gender: ___ Female ___ Male

Child's Grade and School (if applicable): _____

Does your child have any allergies? _____

Does your child have any health concerns or special needs of which we should be aware ?

How would you describe your child's spiritual life?

My Child is new to Jesus and the Church.

My child is learning about Jesus

My child is actively interested in following Jesus.

I am not sure how I would describe my child's spiritual life.

Family Information

Parent or Guardian Name (s):

_____ D.O.B. ___/___/___/

_____ D.O.B. ___/___/___/

Do parents reside in the same household? _____yes _____no

Address _____

City _____

Home # _____ Cell # (s) _____

Email(s) _____

Sunday service hour we attend: _____9:30 a.m. _____11:00 a.m.

Names of people who may pick up my child: _____

Are there any security risks or is there anyone who may not pick up your child?

My family would be interested in:

- Infant baptism or dedication.
- Spiritual leadership tools for the home to help parents pass on their faith.
- Parent/Child classes to learn about God together such as "Rhythm Events for Preschoolers", "For Heaven's Sake: A Gospel Presentation." First Communion" and "First Steps for Young Believers."
- Family friendly events, service projects and mission trips where we can learn about and serve God together.
- Learning more about Youth Ministry: _____Middle School _____High School
- Speaking with the Children's (Katharine) or Family Ministry Pastor (Doug)
- More information on services available for families in crisis.
- Other: _____