



2023-24 Children's Ministries Registration Form 524 Thunderbird, El Paso, Texas 79912 915-584-2133

* Cell Phone Name * Cell Phone Name				
Street Address / P.O. Box	City	State	Zip	
*Email Address(es): *Join our GroupMe communicat	ion app! "Western Hills Children'	s Ministries"		
	1st CHILD			
Name:	Grade:	Circle: Ma	le or Female	
Special Notes/Allergies:		DOB		
	2 <sup>nd</sup> CHILD			
Name:	Grade:	Circle: M	lale or Female	
Special Notes/Allergies:		DOB		
	3 <sup>rd</sup> CHILD			
Name:	Grade:	Circle: Male or Female		
Special Notes/Allergies:		DOB		
What school(s) do your children atter	d?			
Ac	ditional children can be added on the other side of	of this form.		
Emergency Medical Relea	ase Form			
Doctor's Name	Phone			
nsurance Information				
Name of Emergency Contact Person	Relationship	Phone		
give permission for my child to be nave placed in their care.	treated as necessary in case of a n	nedical emergency by t	hose whom I	
X	Print Name			
Sign Name				

Questions about this form? Contact Julie Mattingly, Director of Children's Ministries at 915-584-2133, julie@westernhillsep.org

## WESTERN HILLS UMC PHOTO RELEASE FORM

PLEASE INITIAL AND SIGN BELOW

I DO NOT GRANT PERMISSION FOR YOU TO PHOTOGRAPH, VIDEOTAPE, AND/OR TO RECORD MY CHILD'S VOICE AND SOUNDS AND TO USE ANY OR ALL SUCH PHOTOGRAPHS, RECORDINGS, AND REPRODUCTIONS THEREOF IN AND/OR AS A PART OF ANY MOTION PICTURE, VIDEO PRODUCTION, BROADCAST, PUBLISHED PRODUCTS, RELATED ADVERTISING, DISPLAYS, OR IN EXHIBITION USES. I FURTHER DO NOT GRANT THE USE OF MY NAME IN CONNECTION WITH MY COMMENTS AND OPINIONS.	I DO hereby grant permission	n for you to photograph, videotape, and/or to re	ecord my child's voice and sounds and			
name in connection with my comments and opinions. I hereby grant and assign to Western Hills UMC all non-exclusive rights of every type and nature and the unlimited distribution and other utilization of the pictures, images, tapes or products by any method or in any manner and in any and all media, including theatrical, non-theatrical, radio, videocassette, television, electronic usage, and printed products, and to advertise and publicize said products, in perpetuity, throughout the world. I hereby waive any right that I or my child may have to inspect or approve the finished product and the advertising or other copy that may be used in connection herein. The parties to this contract expressly agree that the laws of Texas shall govern the validity, construction, interpretation, and effect of this contract.  OR I DO NOT GRANT PERMISSION FOR YOU TO PHOTOGRAPH, VIDEOTAPE, AND/OR TO RECORD MY CHILD'S VOICE AND SOUNDS AND TO USE ANY OR ALL SUCH PHOTOGRAPHS, RECORDINGS, AND REPRODUCTIONS THEREOF IN AND/OR AS A PART OF ANY MOTION PICTURE, VIDEO PRODUCTION, BROADCAST, PUBLISHED PRODUCTS, RELATED ADVERTISING, DISPLAYS, OR IN EXHIBITION USES. I FURTHER DO NOT GRANT THE USE OF MY NAME IN CONNECTION WITH MY COMMENTS AND OPINIONS.  GUARDIAN'S CONSENT  I am the parent or guardian of the above-named participants*. I hereby approve and consent to the use of his/her video image and name, as well as comments and opinions expressed, according to the terms mentioned above. I affirm that I have the legal right to issue such consent.  Date:Signature:	to use any or all such photographs, re	ecordings, and reproductions thereof in and/or	as a part of any motion picture, video			
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Special Notes/Allergies:	Name:	Grade:	Circle: Male or Female			
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	Name:	Grade:	Circle: Male or Female			
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