

Club: \_\_\_\_\_  
Transportation: \_\_\_\_\_  
(do not fill out)

**Treehouse Ministry Registration**  
**Welcome Baptist Church** (please print)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month, day, year

Address: \_\_\_\_\_ Apt. # \_\_\_\_\_ Lot # \_\_\_\_\_  
Street

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Grade: \_\_\_\_\_ Name of School: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Emergency contact (other than parent): \_\_\_\_\_  
Name \_\_\_\_\_ relationship to child \_\_\_\_\_  
Phone number \_\_\_\_\_

List any food allergies/any other allergies or medical concerns with your child:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Permission for Medical Treatment, Photograph/Video Notice, and Release and Indemnity:**  
My permission is granted Welcome Baptist Church, church official, or adult present in charge, to obtain necessary medical attention in case of sickness or injury to my child. Also, I understand that as a participant my child may be photographed or videotaped during normal church events and these photos/videos may be used in promotional materials. I, the undersigned, do hereby verify that the above information is correct and I do hereby release and forever discharge Welcome Baptist Church, their employees, and volunteers from any and all claims, costs, demands, actions or causes of action, past, present or future arising out of any damage or injury while participating in events with Welcome Baptist Church. I agree to indemnify Welcome Baptist Church for any and all claims, demands, damages, injuries, costs, suits or causes of action, past, present, or future, arising out of or caused by my child while participating these events or while on property leased or owned by Welcome Baptist Church .

**I have also read and understand the attached discipline policy (keep the discipline letter for your records).**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Transportation Permission and Release Form

\_\_\_\_\_ has my permission to ride the **Welcome Baptist**  
(child's name)

Church bus/van to **Welcome Baptist Church**, 2730 Anderson Rd., Greenville, S.C.

I agree that **Welcome Baptist Church**, and any of their representatives, whether paid staff or volunteers are not liable in case of accident or illness. In the event I cannot be reached to make arrangements for emergency medical care at the time of illness or accident, I hereby authorize **Welcome Baptist Church** to take my child to emergency care.

Name of parent/guardian (please print)

Signature of parent/guardian

**BUS RULES:**

1. Remain seated at all times.
2. Keep hands and feet to yourself.
3. No loud talking, yelling, or bad language.
4. No eating or drinking on the bus.

*Failure to follow these rules may result in suspension or in ineligibility to ride the bus.*