

Covenant CRC 2020 GEMS REGISTRATION

Last Name: _____ First Name: _____

Date of Birth: _____ School: _____ Grade: _____

Street Address: _____

Mailing Address (if different) _____ Postal Code: _____

Home: (204) _____ Mobile Mom: (204) _____ Mobile Dad: (204) _____

Email address(es) for GEMS communication: _____

Parent Name(s): _____

Home church (if applicable): _____

Manitoba Medical (6-digit) # _____ PHIN (9-digit) # _____

Any medical conditions / allergies? _____

Emergency Contact and phone number (if different from above): _____

Permissions:

- I give consent for my child to participate in the activities of the Covenant CRC GEMS program.
- I authorize any GEMS Counselor to act on my behalf in a medical emergency if I cannot be contacted
- I give permission for my child's photo to be taken and used for the GEMS Facebook page (this is a closed group)
- I give permission for my child's photo to be taken and used for Covenant CRC's website GEMS page (no names)

Signature of Parent or Guardian

Date

Is this your first year at GEMS? No Yes

Do you have a GEMS Discovery Badge book? No Yes
(the badge book is usually introduced to grade 3 in January, and used through grade 6)

Are you interested in joining our GEMS private Facebook group? No Yes

Registration Fee: \$25.00 _____

Badge book: \$20.00 _____

Paid by: Cash _____ Cheque _____ **Total** \$ _____

(Please make cheques payable to "Covenant CRC GEMS")