

REGISTRATION

CHILDCARE FOR CLERGY SPOUSE BRUNCH

Thursday, June 6 from 9:30-12:30

At Galloway UMC 305 N. State Street, Jackson

Parent #1: _____ Cell _____

Email _____ District _____

Clergy () Clergy Souse ()

Parent #2: _____ Cell _____

Email _____ District _____

Clergy () Clergy Souse ()

Child's Name	Age	Special Instructions	Allergies

Emergency Contact (Other than parents) Name _____

Cell and other helpful information _____

Persons who may pick your child/children up:

Persons restricted from picking your child/children up:

- **I will be attending the Clergy Spouse Brunch** and Business Meeting during this time
- I understand that I drop off no earlier than **9:30** and pick up no later than **12:30** that Thursday
- **Registration for childcare is due by May 24.** Scan and emailed this form to mechelle.stockett@gmail.com or call/text 601-832-3177—being sure to leave contact information so I can call you back.
- I understand that there are **limited spaces** and that there is a chance that my child/children might not get a spot. Watch text/email for confirmation from Mechelle. Or, be sure to follow up by contacting me.
- I will pay **\$5 per child**

Signed _____ Date _____

Amount to be paid: _____ (number of children) X \$5/each = _____