

First Baptist Church of Shepherdsville
254 So. Buckman St. Shepherdsville, KY (502) 543-7721
Emergency Contact and Medical Information for Students

		M	F
Student's Name	Date of Birth	Grade	Sex
Parent's/Guardian's Name (Contact 1)		Parent's/Guardian's Name (Contact 2)	
Home Phone	Cell Phone	Alt. Phone	Email address(for updates on programs)

Alternative Emergency Contact & Pick-up
(People we can release your child to if you are unable to pick-up)

Emergency Contact & Authorized Pick-up (Contact 3)		Emergency Contact & Authorized Pick-up (Contact 4)	
Home Phone	Work Phone	Home Phone	Work Phone
Address		Address	
City, ST ZIP Code		City, ST ZIP Code	

Medical Information

Hospital/Clinic Preference	
Physician's Name	Phone Number
Allergies/Special Health Considerations	

My child is able to view movies rated: (circle all that apply)	G	PG	PG-13
<p>I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency. I so release, acquit, and forever discharge First Baptist Church of Shepherdsville, their personnel, chaperones, and any parties volunteering on behalf of the church from any and all actions, claims, damages, liabilities, costs, or expenses of any kind growing out of or relating to its programs.</p>			
Parent's/Guardian's Signature	Date		
<p>I give my permission for my child's picture and/or likeness to be used for First Baptist Church of Shepherdsville display, promotion, and advertising, including print media for brochures, articles, and website. Please sign below to indicate permission for your child to participate in group photos at First Baptist Church of Shepherdsville.</p>			
Parent's/Guardian's Signature	Date		



Early Release After School Program

Dear Parents / Guardians,

First Baptist Church of Shepherdsville is offering a completely FREE Early Release After School Program for students grades Kindergarten - 5th. If you wish to send your child to our Early Release After School Program, please fill out the information on the backside of this sheet and send it into your child's school or First Baptist Church of Shepherdsville directly. **Please make sure that you send a bus note (bus #429) to your child's school EVERY early release so that the school can make sure your child is dismissed correctly.** Your child may be picked up any time before 6:00pm if he/she is not going to attend Wednesday night church activities.

A schedule is provided below to give you an idea of how we will be spending our time. We will do everything in our power to ensure that your child is nurtured spiritually, emotionally and physically while in our care. There will be a group of volunteers that will include former / present teachers and community workers and all volunteers above the age of 18 will have a background check on file.

Additionally, we have a nut free policy, however some of our snacks may have been processed in factory's that process other nut products and therefore may contain traces of nuts. If your child has a food allergy, please let me know BEFORE your child attends.

Blessings,

Christi Bleemel
Minister to Children & Students
(502) 297-3850

Schedule (times are approx.)

2:00pm - 2:30pm - Snack
2:30pm - 3:15pm - Homework / Tutoring
3:15pm - 6:00pm - Fun Games, Crafts & Activities
6:00pm - Pick-Up or Dismissal to Wed.Night Activites
7:00pm – Pick-Up from Wed. Night Classrooms