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## Bus Rider Registration Form

I, \_\_\_\_\_, the parent/guardian, hereby give permission to Colonial Hills Baptist Church to involve my child, \_\_\_\_\_, in their Church Ministry. As my child's parent/guardian, I agree with the following:

I agree to have Colonial Hills Baptist Church teach my child about God and the Bible.

I agree that in the unlikely event of injuries, loss of personal belongings, or damage of personal belongings, that Colonial Hills Baptist Church, along with the pastors, bus workers, bus drivers, teachers, and volunteers, will not be held responsible.

I agree to notify Colonial Hills Baptist Church all significant information regarding my child's health.

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Name of parent/guardian: \_\_\_\_\_

Name of child: \_\_\_\_\_

Child's date of birth: (mm/dd/yy) \_\_\_\_\_ Child's grade: \_\_\_\_\_

House/cell number: \_\_\_\_\_

Home address: \_\_\_\_\_

Specific health notification: \_\_\_\_\_

\_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_