

***Nursery Registration Form***  
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**Child's Name:** \_\_\_\_\_

Nickname: \_\_\_\_\_ Birth Date: \_\_\_\_\_

**Parents/Guardians:** \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Who May Pick Up Child from Nursery: \_\_\_\_\_

I give my permission to Reflections Church to keep the information listed above, in records, for use of the Nursery/Children's and Youth ministries. Yes  No

I give my permission to Reflections Church to use my child's name and/or photo on material posted within the church. Yes  No

I would be willing to volunteer in the Nursery/Children's Ministry. Please contact me for further details/information. Yes  No

**Parent's/Guardian's Signature:**

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

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**Child's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Soothing Methods**

Blanket \_\_\_\_\_ Pacifier \_\_\_\_\_ Toy \_\_\_\_\_ Game/Songs \_\_\_\_\_ Other: \_\_\_\_\_  
When Child Is Crying He/She Can Be Soothed By: \_\_\_\_\_

**Snacks**

Food Allergies: \_\_\_\_\_  
Breast Fed \_\_\_\_\_ Bottle Fed \_\_\_\_\_  
Usual Feeding Times: \_\_\_\_\_  
Cheerios and/or Gold Fish: Are OK To Give \_\_\_\_\_ Do Not Give \_\_\_\_\_  
Give Only Child's Own Snacks Provided By Parents \_\_\_\_\_  
Concerns: \_\_\_\_\_

**Sleeping**

Sleeping Times: \_\_\_\_\_ Sleeping Position: \_\_\_\_\_  
Likes To Be: Rocked \_\_\_\_\_ Put Down Awake \_\_\_\_\_ Walked \_\_\_\_\_ Other \_\_\_\_\_

**Diapering**

Diaper Size: \_\_\_\_\_ Use Diaper Rash Ointment/Cream: \_\_\_\_\_  
Change Diaper Before the End of Service \_\_\_\_\_ Do Not Change Diaper \_\_\_\_\_  
Change Diaper Only If Soiled/Wet \_\_\_\_\_  
Other Comments: \_\_\_\_\_

**Special Needs/Medical Concerns**

\_\_\_\_\_  
\_\_\_\_\_

I give my permission to Reflections Church to keep the information above, in the nursery, for the use of the Nursery Volunteers. Yes  No

**Parent's/Guardian's Signature:**

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