

Parent's Night Out

Rules- Please Read Carefully!

- Payment is due before your child(ren) is/are dropped off.
- Credit Card/ Debit Card payments can be made at the door or online in advance at faithbellaire.org/give
- Cash only if you pay at the door, **no exceptions.**
- **Children must be picked up by 10:00 PM. A late fee of \$3 will be charged per minute per child which begins at 10:05 PM. Only cash will be accepted and payment is due upon arrival, NO exceptions.**
- Please bring sleeping bags and/or blankets and pillows for movie time. All items must be labeled with the child's name.
- Children who are not potty trained should bring 4 diapers and baby wipes.
- Please provide infants and toddlers with milk/formula in plastic bottles, snacks and a change of clothes
- Lovies and teddy bears are welcomed, please do not bring any other items such as small toys, beads, rubber bands, dress up items etc.
- We are NOT responsible for lost or stolen items. So please keep this in mind when your child(ren) want to bring electronics, cell phones, ipads, ipods, laptops, game systems etc.

We staff based on RSVP, so it is a must that you do so in advance or we may not have enough room for your child(ren) that night. We will not accept more children than we can staff. This is to ensure your child(ren) have a fun and well supervised time.

Please Adhere to these requests for the safety of your child(ren)

Child's Name: _____ Age: _____ Sex: _____
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Parent/ Guardian: _____
Cell Phone: _____ Home Phone: _____

Parent/ Guardian: _____
Cell Phone: _____ Home Phone: _____

Email address: _____

Emergency Contact: _____

Phone: _____

Please list any information about special problems/needs including: Allergies, Existing Illnesses, Disabilities and Use of medication, etc.

Photo/ Video consent

We will occasionally take pictures and videos of the PNO events. We will use them for a church commercial or on the church's FaithBook page.

I give consent for my child(ren) pictures to be used on the church's FaithBook Page and in the church wide Commercial.

Yes No

Please Read and Sign Below

I hereby certify that my child is in good health and capable of safe participation in this program. I assume all risk and hazards incidental to the conduct of the program. I hereby authorize Parent's Night out at Faith Lutheran Church and its staff to obtain emergency treatment for my child and also authorize medical personnel to treat my child. I understand that Parent's Night Out at Faith Lutheran Church will make all attempts to contact me and that I am responsible for all medical bills and charges arising from medical treatment.

Parent's Signature _____

Date _____