

UNITARIAN UNIVERSALIST FELLOWSHIP AT STONY BROOK
Registration for Children's Religious Exploration Program

Welcome. Please fill out this information for our records. Date _____
We often email notices and ask you to include an email address.

Please understand that registration is considered permission for a child to go on class walks and other outdoor activities on the property. Car trips will have additional forms.

A _____
signature of parent/guardian

Parents Names/s _____

Address _____ /, _____ NY _____
Street Town zip

Phone _____ cell phone _____

Email address _____

CHILD'S FIRST NAME	Date of BIRTH	Any special needs, allergies?
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1. _____

2. _____

3. _____

Our program is a cooperative and we rely on volunteers to make it work. Please consider volunteering! We also urge you to read the newsletter, and pay a pledge to the Fellowship budget, whether you are a member or not.

B

The TIME of our services was changed to accommodate families with young children.
Is 10:00 or 10:30 better for your family? 10 ____ 10:30 ____

C We need help in the following areas: (Please check where you wish to assist.)

assist a leader _____	be on a leader team _____
work on a task force _____	RE Committee _____
play piano, other instrument _____	bring a snack _____
Halloween Party team _____	Christmas services _____
Egg hunt _____	read a story (Circle or Service) _____
other skills? _____	
I am too new to know yet, please have the committee call me later _____	

You may turn this form in at the DRE office or give it to the Director, Linda Volkersz. 2006