



## Children's Church

Dear Parents,

Welcome to Seed of Abraham Christian Center International's children's ministry. We are very pleased to be able to serve God by serving you and your child. Our goal is to see the manifestation of the Holy Spirit in every child as they learn about the truth of God's Word.

Our teachers are all selected carefully to assure they are both Disciples of Jesus Christ and upright citizens, complete with police background checks. Each teacher has a passion to see children succeed and applies themselves whole-heartedly to teaching your child. Our great desire is to teach your child about the love of Jesus and we believe that every child can learn the Word of God and have the Holy Spirit.

We desire to create a safe learning environment for your child. This desire will be more easily fulfilled with your cooperation. By filling out the following questionnaire completely, you will help us to know your child better. Be assured that your child's information will only be viewed by the proper personnel. Please review the Parent Guidelines and follow them. We believe that if we all work together this will be a great experience for students, parents, and teachers.

We look forward to working with your child and we are praying that it will be a blessing to your family. Working with children is a great blessing to us and we thank you for allowing us to be a part of your child's life.

Matthew 19:14 "Jesus said, "Let the little children come to me and do not hinder them, for the kingdom of heaven belongs to such as these."

Mark 10:16 "And He took the children in His arms, put His hands on them and blessed them."

Thank You,  
Seed of Abraham Christian Center International  
Children's Ministry

**SEED OF ABRAHAM CHRISTIAN CENTER INTERNATIONAL  
CHILD INFORMATION FORM**

Date \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone(\_\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_\_) \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Are any of your child's siblings attending today? Yes \_\_\_\_\_ No \_\_\_\_\_

If so

What are their names?

Age?

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**Toilet/Hygiene Needs**

Uses toilet independently \_\_\_\_ Uses toilet with supervision \_\_\_\_

Allergies \_\_\_\_\_

(Food, or otherwise)

Does your child have any medical conditions that we should be aware of?

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**Approved People to pick up your child:** (Must be 18+ years of age)

Name

Relationship to You

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**Emergency Procedures:**

In case of emergency or accident, I understand that 911 will be called. I authorize EMS to administer any medical treatment, medication or appliance deemed necessary by the EMS. I also authorize transportation by EMS to the nearest appropriate medical facility, as determined by EMS. I understand that I will be responsible for payment of all EMS, hospital and physician charges for emergency services to my child.

**Initials:** \_\_\_\_\_

Name: *Please Print* \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Guardian)

Emergency Contact (If you cannot be reached)

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Cell phone(\_\_\_\_\_) \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

**Declaration of Consent**

Please indicate your consent to each item by initialing after each and signing at the bottom.

I, \_\_\_\_\_, Parent/Guardian of \_\_\_\_\_:  
(Please Print) (Please Print)

**Emergency Medical Treatment Consent**

1. Give permission to the medical personnel selected by Seed of Abraham Christian Center International to administer/initiate medical attention as needed.

**Initial:** \_\_\_\_\_

**Liability Consent**

2. Release Seed of Abraham Christian Center International, their staff, and volunteers from any liability concerning any such emergencies or injuries.

**Initial** \_\_\_\_\_

**Photograph/Video Release Consent**

3. Give Seed of Abraham Christian Center International permission to use my child’s name and or picture/video in presentations, broadcast, media releases, newsletters and marketing materials solely for the purpose of promoting Seed of Abraham Christian Center International programs and services.

**Initial:** \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Name *Please Print* \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Safety Procedures and Guidelines:

Please Initial in the blanks to indicate understanding

Please drop your children off in the back of the fellowship hall with their teacher after signing them in with the ushers. If you arrive late (after 11:45am) please take your child to their classroom to sign them in.

Children may not be dropped off in a classroom without *teacher* supervision.

**Initial:** \_\_\_\_\_

Children may not be dropped off past 12pm. We have this policy in place as a courtesy to the teachers so that the learning that is already taking place in the classroom will not be disrupted.

**Initial:** \_\_\_\_\_

For safety reasons, we request that the same person who dropped your child off pick them up. If the person who dropped them off is unavailable to pick them up, please list other approved people on the child information sheet that may pick up your child. All persons picking up children must be 18 years of age or older.

**Initial:** \_\_\_\_\_

Pick your child(ren) up *promptly* after service. Please know that if a child is repeatedly picked up late, they will be removed from children's church and be required to stay with their parents for at least 2 weeks before they can attend children's church again.

**Initial:** \_\_\_\_\_

The ages for Children's Church is 3-8 year olds. All children must be *fully* potty-trained. If a child is outside of these age ranges, even if they are the sibling of a child attending children's church, they may not be in Annex building for children's church.

**Initial:** \_\_\_\_\_

If your child is sick, please keep them with you. If they are on antibiotics, please do not send them to children's church until the duration of their antibiotics is complete and they are no longer sick. If a child in children's church is found to be sick, they will be sent back to their parents.

**Initial:** \_\_\_\_\_

**Discipline Policy:**

It is our desire at Seed of Abraham Christian Center International to see all of our children “trained up in the way they should go so that when they are old they do not depart from it”. Sometimes it is necessary to discipline a child and we would like you to be familiar with our discipline policy so that you can talk with your child after children’s church should discipline occur. Before any other steps are taken in discipline, positive reinforcement is used. Please be aware that if for any reason your child has to be removed from the classroom, we will request a meeting between the parent and teacher, and possibly Pastor Yvette. If a child is removed multiple times, a meeting will be scheduled between parent, teacher and Pastor Yvette and child may be removed from children’s church for a minimum of 2 weeks.

**Step 1: Verbal Warning**

Child will receive a calm verbal warning explaining that the behavior is not acceptable and needs to change.

**Step 2: Time Out**

Child will receive a time out in accordance with their age ( 5 years old=5 minutes time out). Time out should be away from the activities the rest the class is participating in, but close enough to be monitored by the teacher.

**Step 3: Second Time Out**

Child will receive a second and final time out. Time should be doubled (5 years old=10 minutes time out). Time out should be away from the activities the rest the class is participating in, but close enough to be monitored by the teacher.

**Step 4: Remove Child\***

Upon repeated behavior offenses, the child will be removed from the classroom and taken to their parents.

\*It is never our desire to have a child removed from the classroom. These steps are used with the utmost care and it is a last resort to remove a child from the classroom.

Please sign below and turn in with your child’s information sheet:

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I, \_\_\_\_\_ understand Seed of Abraham Christian Center International’s policy of discipline for my child and consent to it.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PARENT GUIDELINES-Please keep this sheet for your personal reference.**

If you have any questions or concerns about anything in this packet or pertaining to children's church, please contact Deaconess Angel Willis (520) 234-4823. She will confidentially answer your questions and address your concerns. We are here to serve you and provide a service for you and your child. We need your input and cooperation in order to do the best job possible!

Please fill out the information forms completely; the more information we have the better we can care for your child.

Pick up your children *promptly* after the service. Remember the teachers are volunteers and should be treated with courtesy.

Inform the teacher of any special needs or concerns for that day. For instance; if they have had a hard morning or are in a bad mood, etc.

Encourage your teachers if you are happy with what they are doing with your child. Remember they have volunteered their time and energy to be there.

Snacks are provided unless instructed otherwise by the parent. Please keep your information packet up to date with any new allergies or food restrictions.