

Christ Lutheran Church  
600 North Ford Road

317.873.3242  
www.clczionsville.org



Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Birthday: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Years in MOPS: \_\_\_\_\_ How did you hear about our MOPS? \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Number: \_\_\_\_\_ Relation: \_\_\_\_\_

List the names and birth dates of all your children:

Child's Name:	Date of Birth:	Moppets Childcare		Allergies	
		Yes	No	Yes	No
_____	___/___/___	Yes	No	Yes	No
_____	___/___/___	Yes	No	Yes	No
_____	___/___/___	Yes	No	Yes	No
_____	___/___/___	Yes	No	Yes	No
_____	___/___/___	Yes	No	Yes	No

**Medical Information Form**

Allergies/Medical Conditions:

Child: \_\_\_\_\_ has \_\_\_\_\_ medicine \_\_\_\_\_

Child: \_\_\_\_\_ has \_\_\_\_\_ medicine \_\_\_\_\_

Child: \_\_\_\_\_ has \_\_\_\_\_ medicine \_\_\_\_\_

**\*\*If your child has any allergies or medical conditions, you will be contacted by our Moppets coordinator, prior to the start of our 2018-2019 year, to submit a specific medical instruction plan for our caregivers\*\***

Family Physician: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I should be contacted IMMEDIATELY at (phone number): \_\_\_\_\_

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

**Registration Fee:** The annual fee to join our chapter of MOPS is \$92. Partial payments are accepted and scholarships are available! Please do not let the cost influence your decision to join – contact one of our coordinators if you need more information – (Teresa Druschel at 937-271-5794 or Julia Goldberg at 317-437-2464).

Please make your check payable to Christ Lutheran Church, with MOPS on the memo line.

Mail registration form and payment to: MOPS at Christ Lutheran Church, 600 North Ford Rd., Zionsville, IN 46077.

Sign me up for Small Discussion Group (meets 4<sup>th</sup> Weds): YES NO

I am interested in a position on the steering committee: YES NO

**Service Opportunities:** The MOPS leadership team provides a special opportunity for service and growth. Please list any service interests. \_\_\_\_\_

Our **first meeting** for the 2018–19 year will be on Wednesday **September 12<sup>th</sup> at 9:15AM**. We will meet on the 2<sup>nd</sup> Wednesdays of the month through May. Small Discussion Group meets on the 4<sup>th</sup> Wednesdays of the month through May.

### **Social Media Permissions**

\_\_\_ I give Christ Lutheran Church permission to put photos of myself on Facebook.

\_\_\_ I give Christ Lutheran Church MOPS permission to put photos of my children on Facebook.

\_\_\_ I give Christ Lutheran Church MOPS permission to put my contact information (via a copy of the directory) on the CLOSED Facebook Page.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date