

Keystone Church

Special Needs Ministry Registration

Child / Student's Full Name :

Preferred Name:

Child / Student's Age & Birthdate:

School/Grade:

Parent (s) or Guardian (s):

Parent(s) Cell Phone Number & Email:

Home Address:

Emergency Contact Person & Phone Number:

Persons able to pick up child / student after service:

Child / Student's Special Need (s):

Medical Precautions / Condition (s):

Any specific safety precautions we should be aware of:

Allergies:

Favorite Color:

Favorite toys or activities:

Things that make them happy:

Things they like to talk about:

Things they don't like to talk about or that make them sad:

Comfort Item: (Some children, depending on age, have what we call comfort items or transitional objects such as a blanket, special stuffed animal, etc that make them feel at ease)

How they communicate: (i.e. signs, gestures, pictures, words, etc.)

Family Info:

How many brothers and sisters? And their names:

Other special family members and friends- names and relationship:

Pets at home-type and name:

Does your child / student need any assistance for safe mobility? (Ex: stand by assistance, physical assistance, assistive devices, etc.)

Restroom: Independent or dependant? Any assistance needed with clothing and fasteners?

Are there any environmental factors that may bother your child? (Ex: loud noises, changes in lighting, etc.)

Do you have any tips on ways to achieve the best focus and response when working with your child / student? (Ex: Communication techniques, redirecting unwanted behaviors, ways to set limits, etc.)

Please share anything else about your child /student that you feel is important for us to know:

Is there anything else we can do to make your family's experience at Keystone even better?

Would you be comfortable with a teen volunteer as a buddy for your child?

Return this completed form to Guest Services and we will contact you about the next step.

Parent/Guardian

Signature: _____ **Date:** _____

For Staff Use Only

Date received: _____

Staff Member who oriented family: _____

Preferred Environment and Experience Time(s):

Waumba Land (Birth-Kinder) or UpStreet (1st-5th grades): Sundays 9:00 am or 10:30 am

Echo Friends(Middle and High School ages): Sunday at 11:45 am

Echo High School: Sundays 6:00 pm

Echo Middle School: Wednesday 6:00 pm

