



SAINT NICHOLAS GREEK ORTHODOX CHURCH

3109 Scio Church Road, Ann Arbor, MI, 48103 · Tel: (734) 332-8200 · Fax: (734) 332-8201 · Rev. Fr. Nicolaos H. Kotsis
Web: www.stnickaa.org · E-mail: fmickkotsis@stnickaa.org



2008 – 2009 REGISTRATION FORM and PERMISSION SLIP

The parent/legal guardian of the child/children who are registered to attend these activities in order that the appropriate care is given if and when needed must complete this health form for your child/children to participate in this activity and **MUST** inform us of any changes through out the year immediately.

My (our) son/daughter: _____ Birth Date: _____
(Please fill out a separate form for each child)

Address: _____ Gender () Male () Female
Street City State ZIP

has my permission to attend and participate in the _____
(Activity)

to be held at _____ at/in _____
(Location) (Location)

from _____ to _____
(Start Date) (End Date)

for the purpose of _____

I (we) understand that it is not the responsibility of Saint Nicholas Greek Orthodox Church of Ann Arbor to provide transportation to or from this activity and hold harmless the Saint Nicholas Greek Orthodox Church of Ann Arbor, Michigan, its Priest, Parish Council, Officers, Advisors and Chaperones for any and all harm or injury that may occur to my above named child while traveling to and from and attending and participating in the above mentioned event. I (we) release Saint Nicholas Greek Orthodox Church and its agents from any liability for any accident, injury, or loss of property of my (our) child. I further state that my (our) above named child shall follow the directions and advice of the advisors and chaperones accordingly while traveling to and from and while attending and participating in the above named event.

PLEASE NOTE: We expect our _____ members to respect one another, our host(s) and their property at this function. In addition, to behave in accordance to the rules set by the host, chaperones, advisors, and Saint Nicholas otherwise they will be required to phone parents to pick up their child and take them home.

Name of parent/legal guardian(s): _____
(Please Print)

Signature of parent/legal guardian: _____ Date: _____

Address(if different from above): _____
Street City State ZIP

Father: Daytime Phone (____) ____ - ____ Evening Phone (____) ____ - ____ Cell Phone (____) ____ - ____

Mother: Daytime Phone (____) ____ - ____ Evening Phone (____) ____ - ____ Cell Phone (____) ____ - ____

E-Mail Address (list all): _____

I (we) also give permission for my (our) son/daughter to ride in a vehicle driven by an adult chaperone (18 years of age and over) pre-approved by the Saint Nicholas Greek Orthodox Church Parish Council and Rev. Father Nicolaos H. Kotsis.

Signed (Father): _____ Signed (Mother): _____

Suggested Donation Registration is \$35 per Family

_____ Cash _____ Check (Please make your check payable to Saint Nicholas G.O.Y.A.)