



Child's Information

A.M. MOPPETS

P.M. MOPPETS

Teen MOPS

Important Please Fill Out And Sign

I consent to have my child's picture used by CCC for promotional purposes. Yes No

Your signature

Date

Please Complete this section for all of your children, whether or not they will attend with you.

Mom's Name: _____ Phone: _____

Child's Name (Last name too, if different from mom's) _____

Allergies: _____

Birth Date: ___/___/___ Age (as of 9/01/09) _____ Months (i.e. a birthday of 9/01/07 would be 24 months)

Circle appropriate group: AM MOPPETS PM MOPPETS Teen MOPS Child Not Attending

Child's Name (Last name too, if different from mom's) _____

Allergies: _____

Birth Date: ___/___/___ Age (as of 9/01/09) _____ Months (i.e. a birthday of 9/01/07 would be 24 months)

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Mail this completed form along with your **Registration Fee**. To be eligible for Early Bird registration must be received by **May 22nd..** Make checks payable to Christ Community Church. Mail to:

christcommunitychurch

MOPS Registration
4400 55th Street NW
Rochester, MN 55901

2009 – 2010 MOPS REGISTRATION

(EVERYONE must complete this form, including the Steering Team, DG Leaders and Committee Members)

Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____

Birthdate: ___/___/___ Husband's Name (if applicable): _____

E-mail: _____

Church Home: _____ First year MOPS: Yes No

Do You Work? Full-Time Part-Time Stay-at-Home

Is Your Youngest child in Kindergarten? Yes No

Morning MOPS

(check ALL applicable options)

I would like to attend Morning MOPS and also enroll my child(ren) in MOPPETS. (Please fill out info on back for ALL your children, whether or not they will attend).

I would like to attend Morning MOPS, but have made alternate childcare arrangements. (Please still fill out info on back for ALL your children).

I am willing to help with childcare 4-times/year during the Morning MOPS Steering and DG leaders meetings held 9-11:30 a.m. on the fourth Tuesday of each month, Aug. - April. (Your children may come with you. The first 20 women to select this are automatically enrolled in MOPS this year).

I am willing to serve on this committee in Morning MOPS: Hospitality Crafts Publicity

I would like to be contacted about potential scholarships available to attend MOPS (This is kept confidential).

I would like more information on how to serve with Teen MOPS.

Evening MOPS

(check ALL applicable options)

I would like to attend Evening MOPS. (Please fill out info on back for ALL your children).

I would like to attend Evening MOPS, and would like childcare for my children. (Please fill out info on back for ALL your children, whether or not they will attend).

I would like to attend Evening MOPS free of charge by providing childcare during Morning MOPS. (Paid positions are also available).

I am willing to help with childcare 4-times/year during the Evening MOPS Steering and DG leaders meetings held 7-9 p.m. on the fourth Tuesday of each month, Aug. - April in exchange for free meetings. (Your children may come with you).

I am willing to serve on this committee in Evening MOPS: Hospitality Registration Crafts Publicity

I would like to be contacted about potential scholarships available to attend MOPS (This is kept confidential).

I would like more information on how to serve with Teen MOPS.

Teen MOPS

(check ALL applicable options)

I would like to attend Teen MOPS. (Please fill out info on back for ALL your children, whether or not they will attend).

Don't Forget to fill out the back side!!!!