



2008-2009

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number: _____ **E-Mail Address:** _____

Birthday: _____ **Spouse's Name (if applicable):** _____

Anniversary (if applicable): _____

Prior MOPS Attendee? **Yes** **No**

Do you attend a Church? **Yes** **No** **If Yes, Where?** _____

How did you hear about this MOPS group? _____

<u>Children</u> (Please list all children even if not attending MOPPETS)	<u>Sign up for MOPPETS</u>	
	Yes	No
Name: _____ Date of Birth: _____		
Allergies or Medical Conditions: _____		
Name: _____ Date of Birth: _____	Yes	No
Allergies or Medical Conditions: _____		
Name: _____ Date of Birth: _____	Yes	No
Allergies or Medical Conditions: _____		
Name: _____ Date of Birth: _____	Yes	No
Allergies or Medical Conditions: _____		

Financial Information:

The MOPS to MOM Connection/Registration Fee is \$20.00 prior to July 1st. After July 1st, the registration fee increases to \$23.95. This fee is due when the Registration form is turned in. The MOPS meetings dues for the 2008/2009 MOPS year are based on \$6.00 per meeting. There will be two semesters. The meeting dues are payable at the first meeting in September (\$48.00) and then again at the first meeting in February (\$48.00). Moms are expected to pay by semester; if you cannot pay by semester, please contact our Coordinator. All fees (including registration and meeting dues) are non-refundable. Special circumstances will be considered.

Please sign indicating you have read and understand the financial policy: _____

PLEASE MAKE ALL CHECKS PAYABLE TO: HOLY CROSS LUTHERAN CHURCH

RELEASE AND CONSENT

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, I irrevocably consent to and authorize the MOPS group of Holy Cross Lutheran Church, Jenison, MI, to photograph me and/or my family members and to use pictures, silhouettes or other reproductions of my/our physical likeness(es) for any business purpose whatsoever, without any further compensation to me/us.

I agree that the MOPS groups of Holy Cross Lutheran Church, Jenison, MI, shall have the full and exclusive right to adopt, edit, cut, combine or translate such materials in order to accommodate it for any business use. I waive the right to inspect or approve the materials or the use to which such materials may be applied. I hereby release the MOPS group of Holy Cross Lutheran Church, Jenison, MI, from any and all claims related to the use or reproduction of such materials.

I acknowledge that I have read this release and consent form prior to signing it and that I understand its contents.

Signature

Date

MAIL TO: HOLY CROSS LUTHERAN CHURCH, 1481 BALDWIN, JENISON, MI 49428

FINANCE USE ONLY:	_____MOPS TO MOM CONNECTION PAID	CASH_____	CHECK#_____
	_____MOPS TO MOM CONNECTION REGISTERED		
	_____MOPS DATABASE INFO ENTERED		
	_____FIRST SEMESTER PAID	CASH_____	CHECK#_____
	_____SECOND SEMESTER PAID	CASH_____	CHECK#_____