

First Methodist Church – Bridgeport, Texas

Dear Parent or Guardian,

In order to for the Kidz Zone program to work as smoothly and efficiently as possible, we feel there is some information you should be aware of.

Transportation: Your child may be picked up at either the BES or BIS campus on Wednesday for Kidz Zone. In order to do so, you must fill out an Alternate Transportation Form (one per semester) that needs to be given to their teacher and a Registration Form that is given to Randee.

If you child will be not be riding the church van for any reason, please let the church office know, (940) 683-2780 or Randee (940) 393-5857. This gives us a heads up to the van driver.

If your child wishes to invite their friends to Kidz Zone with him/her, the child who is invited must have a registration form on the file with children's ministry. Please note that there is only room for 13 students on the church van for each campus. After the limit is reached, alternate transportation will need to be arranged.

Children **MUST BE SIGNED OUT** by an authorized person at 5:00pm every Wednesday. If the normal pick-up person is sending someone else, there needs to be a note sent with said child or please let Church Office know @ (940) 683-2780.

Kidz Zone follows the school calendar concerning holidays, early release and school closings!

If you have any questions, please do not hesitate to contact Randee at randeehawkins@fumcbridgeport.org or cell (940) 393-5857 or the church office at (940) 683-2780.

First Methodist Church – Bridgeport, Texas

Kidz Zone Registration Form

(Please fill out per child)

Child's Name _____

Address _____

City/Zip: _____

Home/Cell Phone: _____

Email: _____

DOB: _____

Grade/Teacher: _____

Parents/Guardians: _____

Emergency Contact: _____ Phone: _____

Allergies or Medical Conditions: _____

Who may pick-up child other than parents/guardians:

Do you mind receiving a text message, if needed? ____yes ____no

_____ **has/does not have** my permission to ride the FMC Church van
from _____ school on Wednesdays when Kidz Zone is in session.

Parent/Guardian Signature: _____ Date: _____

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**Alternative Transportation Form
For School Pick-Up**

Students Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Name of Campus: _____

Parent or Legal Guardians Name: _____

Address (if different): _____

Phone #: _____ Work Phone: _____

Email: _____

By signing this form I give permission for the First Methodist Church of Bridgeport, to pick my child up from school, on Wednesdays.

Signature of Parent or Guardian: _____ Date: _____

FMC Bridgeport Photo Release Form

I, _____, give my permission for FMC Bridgeport to post pictures of my minor child(ren) on:

FMC Bridgeport website

FMC Bridgeport Facebook page

FMC Bridgeport Instagram and/or other social media

Child Name: _____ Child Name: _____

Child Name: _____ Child Name: _____

Parent/Guardian Name (Please Print): _____

Parent/Guardian Signature: _____