

Park Avenue Church Nursery Request Form (8/2004)

Name: \_\_\_\_\_ Church Event: \_\_\_\_\_ Date \_\_\_\_\_

Person in Charge: \_\_\_\_\_ Phone #: \_\_\_\_\_ Elder/Ministry Head Signature \_\_\_\_\_

The "group, function or session" will meet [circle which applies]: Mon/Wed/Fri AM 9:00-12:00 Tues.PM 6:15-8:30 Wed.PM 6:15-8:15  
 Duration of group, function or session: Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

Please write the child's name in the appropriate box below. Use additional copies of this form for additional children.

Please advise anyone using the nursery that they must provide their child with diapers, wipes, and a snack. Also advise us if there is a special need the child has.

Family Name	Newborn to Waddler	Toddler to 24 Months	2 Yrs Old (before Sept. 1 <sup>st</sup> .)	3 Years Old	4 Years Old	5 Years Old (PM Only)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

