

Park Avenue Church Nursery Request Form Special Events (8/2004)

Name: _____ Church Event: _____ Date _____

Person in Charge: _____ Phone #: _____ Elder/Ministry Head Signature _____

The "group, function or session" will meet: Day(s) of Week _____ Time(s) _____

***If more than one 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 st .)	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.						