CCOP Music Ministry
St. Elizabeth Seton Church
4001 Stoneridge Drive
Pleasanton, CA 94566
(925) 484-5020

Contact Information

Children's Choir

- 3rd to 8th grades
- Minister at 4:00 PM Sunday liturgy at St. Elizabeth Seton
- Rehearsals: Wednesdays, 5:00 to 6:30 PM

Choir Member:

Last Name:

First Name:

School/Grade:

Birthday (MM/DD):

☐ Male
☐ Female

Parent / Guardian:

Last Name:

First Name:

Address:

City:

ZIP Code:

Home Phone:

Cell Phone:

E-mail:

Emergency Contact (*During Choir Activities*):

Name:

Phone:

Name:

Phone:

Instructions:

1. Fill in as much information as you can. This includes Emergency Contact Information.
2. Submit this form to:
   Joseph Hébert
   St. Elizabeth Seton Church
   4001 Stoneridge Drive
   Pleasanton, CA 94566
   or e-mail completed form to:
   cyoshikami@yahoo.com

Health and Medical Information:

Family Physician:

Address:

Phone:

Medical Plan & No.

Do you authorize the adult leader to administer medical treatment for your childin an emergency?

◯ Yes

◯ No, why?

List all medical conditions (such as allergies, seizures) for which your child requires ongoing medication and state the type and frequency of medication given. Also list any conditions that an adult supervisor needs to be aware of::

Authorized signature of parent / guardian and date: