



Jimmy Finch
MINISTER OF MUSIC

August 15, 2016

Parents,

As Minister of Music, I am excited about the kick-off for Fall 2016 of both PK Praise and KidzPraise starting on Wednesday evenings, beginning August 31, 2016. This weekly opportunity gives your kids from 4 years old through 5th grade a place to express the gospel and biblical truths through the vehicle of musical worship. Many of my early musical experiences started as a young child singing in church with children's choirs and performing my first solo at 7 years old. During my years at ASU, I was extremely involved in the music ministry of MVBC and had the opportunity to co-lead children's choir in the early 90's. The love of music is something I would like to see passed on to all generations and starting at a young age.

This year, in the interest of planning and time on Wednesday evenings, we are pre-registering all children interested in participating in our Kidz Choirs during the next two weekends: Sunday, August 21st & 28th, before and after each of the morning services in the Education Foyer located between the sanctuary and main offices. We will have the MVBC Kidz Choir Registration forms ready for pickup (one per family for one or multiple children) and should be returned to the table by Sunday, August 28th or to the main office during the week.

In order to make Wednesday afternoons a little easier for our families, we are offering a heavy snack supper for all families & children involved in our Kidz Choirs. A suggested donation of \$2 per child/parent is recommended each week to help cover the cost. To make Snack time and transition to choir rehearsal easier, this year all Kidz Choir and family members that would like to participate during Snack Time will be required to purchase a "Mount Vernon Kidz Choirs MEAL CARD". During pre-registration, MEAL CARDS can be purchased (cash, check or debit/credit cards) in the Ed. Foyer for the next two Sundays or during the week in the main office. For the fall semester, we will have 14 Kidz Choir rehearsals through December. Therefore, each MEAL CARD is available for \$28 per card and is fully transferable to the spring semester if all punches are not completely used! (If you would like to eat as a family with your choir member, we suggest purchasing a couple of MEAL CARDS to begin with as a family.) If your child has special needs or allergies, we would suggest packing them a heavy snack of their choice and joining us during "Snack Time" from 5:15-5:45pm each week! Our menu will generally be one of the following: Little Caesar's pizza, Wendy's or Ham/Turkey & cheese subs with apple slices and a cookie.

We need your help and would like to invite all parents and grandparents to consider being a part of our volunteer staff during our Kidz Choir ministry on Wednesday evening so our choir directors can focus on the children and the ministry they have to our congregation and families! Some volunteers are needed to 1) help during choir rehearsal (both musical & "crowd control") 2) to man the Snack Time check in & MEAL CARDS & 3) help pickup, prepare and/or cleanup the heavy snack supper during Snack Time each week! OUR GOAL – is to have MORE volunteers so that there is FULL participation by ALL!

Each of the Kidz Choirs meets during the regular school year and Children's Ministry calendar of events. So, let's get pre-registered and prepared for a new year of Kidz Choirs so we can bring praise to the Lord!

Praise Him!

Jimmy Finch, Minister of Music

MVBC Kidz Choir Registration 2016

Our Kidz Choir Program is open to children who are currently 4 years - 5th grade during the 2016-2017 school year.

Child's First & Last Name: _____

_____ Boy _____ Girl Goes by: _____

*Current Age: _____ Birthday(mm/dd/yy) _____ *Grade: _____

*Medical information (including food allergies) we need to know: _____ None known -- or specify below: _____

Prayer requests or concerns: _____

Child's First & Last Name: _____

_____ Boy _____ Girl Goes by: _____

*Current Age: _____ Birthday(mm/dd/yy) _____ *Grade: _____

*Medical information (including food allergies) we need to know: _____ None known -- or specify below: _____

Prayer requests or concerns: _____

Child's First & Last Name: _____

_____ Boy _____ Girl Goes by: _____

*Current Age: _____ Birthday(mm/dd/yy) _____ *Grade: _____

*Medical information (including food allergies) we need to know: _____ None known -- or specify below: _____

Prayer requests or concerns: _____

Child's First & Last Name: _____

_____ Boy _____ Girl Goes by: _____

*Current Age: _____ Birthday(mm/dd/yy) _____ *Grade: _____

*Medical information (including food allergies) we need to know: _____ None known -- or specify below: _____

Prayer requests or concerns: _____

Please attach a second sheet if you have more than 4 children to enroll for Kidz Choir.

COMPLETE OTHER SIDE FOR FAMILY INFORMATION → → →

Asterisk * items are REQUIRED

FAMILY INFORMATION

Parent/Legal Guardian Name(s): _____

Mailing Address: _____

Contact Information:

Home: _____ Work: _____

*Cell: _____ *E-Mail: _____

(Please circle the best form of communication for you)

Church currently attending: _____

DISMISSAL INSTRUCTIONS:

My child(ren) may be picked up from Kidz Choir by the following individuals **only**:
(please list **all** applicable names **including** parent/guardian)

EMERGENCY CONTACTS: (Alternate contact after parent)

(Please circle one)

Name: _____

Phone #: _____

Home – Work – Cell

Relationship to child: _____

Phone #: _____

Home – Work – Cell

Name: _____

Phone #: _____

Home – Work – Cell

Relationship to child: _____

Phone #: _____

Home – Work – Cell

I give my child(ren) permission to attend Kidz Choir at Mount Vernon Baptist Church: Yes No

I give permission for my child(ren) to be photographed for
Kidz Choir promotional and craft projects: Yes No

I give Mount Vernon Baptist Church and Staff/Agents permission to take my
child(ren) to Watauga Medical Center for any treatment necessary: Yes No

*Name of Physician: _____

*Phone #: _____

Insurance Carrier: _____

Policy #: _____



Parent/Legal Guardian signature: _____

OFFICE USE: Date received _____ By phone _____ Entered _____ Class assigned _____ Copy to _____

Asterisk * items are REQUIRED