

St Peter's UCC Sunday School Registration Form

■ Parent(s) Information

Parent(s) Name (first & last): _____

Address: _____

Home Phone: _____

Cell Phone: _____

■ Child(ren)'s Information

Child's Name	Sex	Birth date	Grade
	M / F		
	M / F		
	M / F		
	M / F		
	M / F		
	M / F		

■ Additional Information

_____ It is my preference to have my child(ren) enrolled in 8:30 Sunday School

_____ It is my preference to have my child(ren) enrolled in 10:00 Sunday School

I think I can help!

_____ **YES! I am willing to be a workshop leader for 3 weeks**

_____ **YES! I am willing to be a shepherd.....**

_____ **For the entire school year**

_____ **From Sept 7 through Jan 18**

_____ **From Feb 1 through May 24**

_____ **Alternating with another person every other unit (i.e. 4wks on 4 wks off)**

_____ **YES! I can be an extra pair of hands**

_____ **YES! I can be a substitute teacher if needed**

(OVER)

■ In case of an Emergency

_____ I am usually in worship when my child is in Sunday School, try there first.

Additional Contact if a parent cannot be reached in worship or at home:

Name: _____

Relationship to child: _____

Phone Number(s): _____

ANY ALLERGIES that teachers/staff needs to be aware of? YES NO
If yes, please describe _____

ANY medications taken by your child that the teachers/staff need to be aware of?
YES NO if yes, please list _____

ANY Other special conditions teachers/staff should be aware of? YES NO
If yes, please describe _____

While I understand that every reasonable precaution will be taken, in the event of an emergency I authorize any member of the Sunday School staff to get emergency help for my son/daughter as is deemed appropriate.

I understand that every attempt will be made to contact me in case of an emergency.

I understand that my child may be photographed during Sunday School and those photographs may be used for promotional materials for the church (perhaps in the Lamplighter or on the church's website). Your child's name will not accompany the photographs online.

Parent(s) signature

Date

Please return this form to the church office as soon as possible. Thank You.