



# Church School Registration

## (Nursery through Grade 7)

2015-2016

Please complete the form below, and return it to the church by mail or in person. Please complete one form for each child.

### Your Child's Information

Child-Last Name		First Name				Nickname				
Address										
City				State		Zip				
Nursery (Birth – 2 Yr. Old)	3 Yr. Old	4 Yr. Old	5 Yr. Old/ K	1 <sup>st</sup> Grade	2 <sup>nd</sup> Grade	3 <sup>rd</sup> Grade	4 <sup>th</sup> Grade	5 <sup>th</sup> Grade	6 <sup>th</sup> Grade	7 <sup>th</sup> Grade
In which Church School Class are you enrolling your child? <i>Please Check Above.</i>										
		Yes		No		Date				
Child's Date of Birth		Has your child been baptized? If so, please provide month/year.								
Yes		No		Comments:						
Any Allergy Concerns?										
Yes		No		Comments:						
Any Health or Physical Challenges?										
Yes		No		Comments:						
Any Learning Challenges or Special Needs?										

Your Child's hobbies/interests/activities/musical instruments:

### Parent Information

Mother's Name		Address, If Different Than Above		Home Phone		Cell Phone	
Father's Name		Address, If Different Than Above		Home Phone		Cell Phone	

Parent Email(s) for Class Information

Are you members of this Congregation?		Yes		No	
<b>Yes, I would be happy to help!</b> <i>Please Circle</i> Church School Volunteer    Thanksgiving Baskets    Advent Wreath    Ministry Team Nativity Pageant    Easter Event    Children's Musical    Children's Sunday Celebration    Other: _____					

### Pick Up Information

*Any child enrolled in 3<sup>rd</sup> grade or below must be picked up in the classroom. It is necessary to indicate who has your permission to pick up your child. This includes siblings. Thank You.*

Name		Name		Name	
Name		Name		Name	