

St. John's Sunday School Registration Form

General Student Information

Child's Name: _____ Date of Birth: _____ Baptism Date: _____

Scholastic Grade Level: _____ Has child ever attended Sunday School before? Yes No

If child has attended Sunday School before, please provide name & address of church: _____

Allergies / Special Health Considerations: _____

(Parent/Guardian's Name)

(Parent/Guardian's Name)

Home Phone

Cell Phone

Home Phone

Cell Phone

Address

Address

City, State, Zip Code+4

City, State, Zip Code+4

E-mail Address

E-mail Address

Alternative Emergency Contacts

(Name / Relationship to Child)

(Name / Relationship to Child)

Home Phone

Cell Phone

Home Phone

Cell Phone

Address

Address

City, State, Zip Code+4

City, State, Zip Code+4

General Photo Release & Field Trip Permission

I give my child permission to go on field trips as established by St. John's Sunday School and youth ministries. I release St. John's Lutheran church and its representatives from liability in case of accident during these activities/field trips, as long as normal safety procedures have been taken. (Note: Activity/field trips will be announced in advance via one of the following: church bulletin/church newsletter/letter or e-mail to parents) Parent Initials: ____

I give permission for St. John's Lutheran church to publish any photos taken during Sunday School, youth ministry activities/field trips to be published in the Guttenberg Press, St. John's Newsletter, and/or St. John's website. Parent Initials: ____

Parent Signature: _____

Date: _____