

Prince of Life Lutheran Church Sunday School Registration Form

2009 - 2010

Please fill in information and sign the form. Please complete separate forms for each child.

Child's name _____

Date of birth _____ Age _____

Baptismal birthday _____

Grade entering _____

Address _____

City/Zip _____

Parent's Names _____

Home phone(s) _____

Cell phone(s) _____

E-mail address _____

Service normally attended _____

Contact person who can be called in the event of an emergency (not a parent):

Name _____

Phone # _____

Please list any allergies, conditions, or other information that our staff needs to know to help your child have a safe and healthy experience.

I give permission to have my child photographed during Sunday School.

Yes _____ No _____

I give permission to have my child's photograph put on Prince of Life's website. Children's names are not disclosed on the web site photos.

Yes _____ No _____

Parent Signature(s)