

Has your **mailing address** changed in the last year or are you registering for Sunday School for the first time? If yes, please provide your current mailing address:

Has your **preferred email address** changed in the last year or are you registering for Sunday School for the first time? If yes, please provide your current preferred email address:

Have your **preferred phone numbers** changed in the last year or are you registering for Sunday School for the first time? If yes, please provide your current preferred phone numbers:

Parent Name(s)

Children

1 Name: _____

DOB: _____

Fall Grade: _____

Allergies/Medical Conditions

2 Name: _____

DOB: _____

Fall Grade: _____

Allergies/Medical Conditions

3 Name: _____

DOB: _____

Fall Grade: _____

Allergies/Medical Conditions

I give my permission for medical personnel to treat my children in the event of an emergency.

X _____

May we use photos of your child participating in parish events and programs on bulletin boards, slide shows and newsletters? **Yes No**

May we post UNTAGGED photos of your child participating in parish events and programs on our website and Facebook page? **Yes No**

Volunteers! We need volunteers for Sunday School and special events. Please check off programs events and support you would consider volunteering for. You will be contacted by Susie Coffman with details!

_____ Sunday School Teacher for Grade _____
_____ Easter Egg Hunt
_____ Halloween Party
_____ Sewing Projects

_____ Christmas Pageant
_____ Errand Running