

Sunday School Registration Form

Parent / Guardian Information

Name of parents / guardians _____

Address _____

Phone # _____ email: _____

Cell # _____

Youth Information

Name _____

Age as of Sept. 1 _____ Date of Birth _____

Grade Entering this Fall _____

Day of week most likely available for activities _____ am pm

What Activities is this child involved in outside of church? _____

Youth Information

Name _____

Age as of Sept. 1 _____ Date of Birth _____

Grade Entering this Fall _____

Day of week most likely available for activities _____ am pm

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