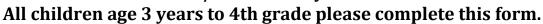
## **REGISTRATION FORM**

2018/2019 Sunday School



## **REGISTRATION FEE: \$15 per child.**

First Child's Name:

Second Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_ School Grade: \_\_\_\_ Gender: \_\_\_\_

m.	
e:	
	-
n expected to	
Sunday:	
provided.	
ming stations station leaders.	

Date of Birth:	Age:	_ School Grad	de:	_ Gender:		-	
Third Child's Name:							
Date of Birth:	Age:	_ School Grad	de:	Gender:		-	
Name of parent(s):							
Address:		City	//State:		Zip C	ode:	
Home Phone Number:	Parent/caregiver's cell phone:						
Home email address:	Home church:						
Allergies or other medical of the contact person Relationship to child:	(other than pare	ent):					
As the parent/Guardian of participate in this Ministry	•		-		tand that I	I am expected to	
Shepherd			Stati	on Leader			
Lead a group of students	oximately		ne of these stat	tions twice i	per Sunday:		
2-3 Sundays a month. Yo	•	Cooking, Art, Story or Games.					
other per group			All mat	erials and instr	uctions will	be provided.	
Whatavar I am most	noododl		Cumn	lios Catharar			
Wherever I am most needed!			Supplies Gatherer  Locate all materials needed for upcoming stations				
						e for station leaders.	
Name of volunteer(s):			•		•		
Phone:	Emai	l:					
Office use) Amount Paid	Check #	Cash	<del></del>				