

**Havre De Grace United Methodist Church**

**Sunday School 2018-2019 Registration**

*(Please complete one form for each child and fill out both sides)*

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ Home phone \_\_\_\_\_

\_\_\_\_\_ Cell phone \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency contact and phone number: \_\_\_\_\_

Emergency Sunday School Closing Number to receive Text: \_\_\_\_\_

Grade level or class in which you are enrolling your child \_\_\_\_\_

**(All children must be potty trained)**

**Special Needs Information of your child:** Please list any learning problems, emotional or physical needs and allergies to food or medication:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ My child can **walk unescorted** to and from the Sunday School Classroom.

\_\_\_\_\_ I **will escort** my child to and from the Sunday School Classroom.

Yes \_\_\_\_\_ No \_\_\_\_\_ I grant **permission** for **photographs showing** my child involved in church activities to be used on church websites, newspaper articles, posters etc. that can be viewed by the public.

Yes \_\_\_\_\_ No \_\_\_\_\_ I grant permission for my middle school or high School child to **leave church property** during Sunday school hours for local field trips with their class teacher.

*(Please complete one form for each child and fill out both sides)*

Are you willing to Teach, Assist or Substitute for a Sunday School Class as needed?

Yes \_\_\_\_\_ No \_\_\_\_\_ (Training will be provided if necessary)

Child lives with (indicate names and relationship)

Father \_\_\_\_\_ Name \_\_\_\_\_

Mother \_\_\_\_\_ Name \_\_\_\_\_

Guardian \_\_\_\_\_ Name \_\_\_\_\_

Please list names, addresses and phone number where mailing and phone calls should be directed if different from above:

\_\_\_\_\_

**Family Information:**

Parents are: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ other \_\_\_\_\_

Please explain other: \_\_\_\_\_

Name of the Church parents belong to, if not Havre De Grace United Methodist Church.

Father \_\_\_\_\_ Mother \_\_\_\_\_

**Signature of parent or guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_