

Sunday School

Please complete a separate enrollment form for EACH CHILD.
Forms will remain *with the teacher* during class.

Please Print Clearly

Child's name: _____

Grade in School: _____ School Year: 20____ to 20____

Date of Birth: _____

Food Allergies: _____

Name of person responsible for this child during the Sunday School hour:

Relationship to the child?

Will this person be on the premises during Sunday School?

If so, where can we locate him/her if needed?

Phone number to reach this person during the Sunday School hour:

Grade/Classroom:

School Year: