



# Church School Registration Form 2019-2020

For Children's Classes

FAMILY NAME: \_\_\_\_\_

<i>First Name</i> [use back if necessary]	<i>Birthdate</i>	<i>School and Grade Level</i>	<i>Special Interest and Activities</i>	<i>Allergies</i>

\*Address: \_\_\_\_\_  
Street City/Town Zip code

\*Telephone: \_\_\_\_\_ \*email: \_\_\_\_\_

\*If you share custody of minor children, please list the contact information for the other parent/guardian:

\*Address: \_\_\_\_\_  
Street City/Town Zip code

\*Telephone: \_\_\_\_\_ email: \_\_\_\_\_

\***Emergency Contact During Church School Hour-** \* \_\_\_ I will be in the church building *or* Call:

\*The following adult(s) are allowed to pick up my child(ren): \_\_\_\_\_

\*I **do/do not** (please circle one) give permission for my child(ren)'s photograph(s) to appear on FUMC's website and/or Facebook page. My child(ren)'s name(s) **may/may not** (please circle one) be included.

**Signature of Parent/Guardian** \_\_\_\_\_

*\*Is there any other information that would assist us in serving you or working with your children? (Please use reverse side of this page. All information will be shared with leaders only on a need-to-know basis.)*