

First United Methodist Church of LaGrange
2016-17 Sunday School Registration Form

First and Last Names of Parents/Legal Guardian:

Parent/Guardian: _____

Parent/Guardian: _____

Street Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Emergency Contact: _____ Phone: _____

Other adults who may pick up my children : _____

(Parents please note: Children up through 4th grade must be signed-out of Sunday School by an adult)

Where may we find you during the Sunday School hour?

- Sanctuary
- Sunday School classroom _____
- Nursery/Toddler/Childcare Area
- Other _____

What is the best way for us to contact you during the Sunday School hour?

- Come and get me at the location noted above
- Call me on my cell phone
- Call me on my home phone

Photo Permission:

For purposes of community outreach ONLY, by my signature below, I give First United Methodist Church of LaGrange permission to publish a photo of my child/youth on the church website, Facebook page, or news media. Names will not be posted with the pictures.

Signature: _____

Safe Sanctuary Policies: are available upon request. All Sunday School teachers & childcare workers have been trained in our Safe Sanctuary Policies as well as Behavior Guidelines.

Child Registration Information:

Please complete a section on the reverse side of this form for each child/youth who will be attending Sunday School (2 year olds through high school seniors). Please start with the youngest child/youth first.

Children/Youth Attending Sunday School

Child's Name: _____ First Last
Birthdate _____ Age on September 1 _____ Grade: _____
Special interests and activities: _____
Special needs or allergies: _____
Significant illnesses or medication taken (confidential) _____

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