

Grace First Lutheran
2013-14 Sunday School Registration

Parent Name(s): _____

Home Address: _____

Parent Phone Number: #1 _____ #2 _____

Parent Email: #1 _____ #2 _____

(Most communication will be through email, so please provide an address you use regularly.)

Child #1 Name: _____ Birthdate _____

Name of School _____ Year in School _____

Allergies _____

Other Important Information _____

Child #2 Name: _____ Birthdate _____

Name of School _____ Year in School _____

Allergies _____

Other Important Information _____

Child #3 Name: _____ Birthdate _____

Name of School _____ Year in School _____

Allergies _____

Other Important Information _____

Our Sunday School program can't happen without the work of many volunteers each week. Please circle an area where you can help!

*Substitute Teacher

Helping with Music/Opening Time

Providing Snacks

Prep Work (cutting, bulletin boards, etc.)

Holiday Programs

Other: _____

*We really appreciate the commitment that our teachers make by agreeing to teach every Sunday, but sometimes they miss a week. We are always in need of on-call subs who are willing to fill in occasionally. You will (almost always!) have advance notice and a complete lesson plan will be provided. Please consider helping in this way.