

Foothills United Methodist Church Sunday School Registration Form

Name				
Address				
City/State/Zip				
Telephone		Date of Birth		Grade in School
eMail			as of mm/dd/yy	
Siblings Names & Ages				
Parents Name				
Address				
City/State/Zip				
Telephone		eMail		
Cell number		Work number		
Preference for communication				

Emergency Information

Notify/Relationship				
Address				
City/State/Zip				
Telephone		Work		Other

Additional Information

School Attending			City	
Allergies				
Ways to help Sunday School program (circle)	<i>Snacks/juice</i>	<i>Art materials</i>	<i>Pageant/Faire</i>	<i>Children's Choir</i>
<i>Phone tree</i>	<i>Teacher assistant</i>	<i>Substitute Teacher</i>	<i>Curriculum donation</i>	<i>Nursery substitute</i>
Where parents can be found during service				

Any other information that can help us in working with your child(ren)? _____

Photo Release: I authorize FUMC to use any pictures of my child(ren) to appear on www.FoothillsUMC.net and/or www.facebook.com/pages/Rescue-CA/Foothills-United-Methodist-Church:

Signature: _____ Print name: _____
Date: _____