**CHRIST THE KING LUTHERAN CHURCH**

**SUNDAY SCHOOL REGISTRATION FORM**

PARENTS/ GUARDIAN’S NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBERS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RELATIONSHIP TO STUDENT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AT CHRIST THE KING LUTHERAN CHURCH, WE BELIEVE THAT CHRISTIAN EDUCATION IS THE RESPONSIBILTY OF BOTH THE FAMILY AND THE CHURCH. IF YOUR CHILD IS ENROLLED IN OUR EDUCATION PROGRAMS, WE EXPECT YOU TO VOLUNTEER IN ONE OR MORE OF THE FOLLOWING WAYS. PLEASE CIRCLE ALL AREAS THAT YOU, AS A PARENT, WOULD BE WILLING TO HELP WITH.

TEACHER

SUBSTITUTE

PRESCHOOL HELPER

CHRISTMAS PROGRAM ASSISTANT/ COORDINATOR

CONFIRMATION MENTOR

MUSIC

AT CHRIST THE KING LUTHERAN CHURCH, BIBLES ARE PROVIDED BY THE CHURCH PLEASE MARK IF YOUR CHILD IS IN NEED OF A BIBLE. WE USE THREE BIBLES ONE FOR PRESCHOOL/ KINDERGARTEN, ONE FOR 1ST THROUGH 6TH GRADE.

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CURRENT GRADE:\_\_\_\_\_\_\_\_\_\_\_\_

HEALTH CONCERNS/ ALLERGIES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CURRENT GRADE:\_\_\_\_\_\_\_\_\_\_\_\_

HEALTH CONCERNS/ ALLERGIES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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HEALTH CONCERNS/ ALLERGIES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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HEALTH CONCERNS/ ALLERGIES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

STUDENT NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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HEALTH CONCERNS/ ALLERGIES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT NEEDS A BIBLE: YES\_\_\_\_\_\_\_\_NO\_\_\_\_\_\_\_\_

