



**God's Love Sunday School Registration Form  
2019-2020 School Year  
For ages 3 to Grade 6  
Sundays at 10 AM**



Parent/Guardian Name(s): \_\_\_\_\_

Email Address(es) \_\_\_\_\_

Address (street, city, zip): \_\_\_\_\_

Cell Phone Number(s): \_\_\_\_\_

*Please circle which phone number to use first.*

**We are:**    \_\_\_\_\_ **Continuing Students**            \_\_\_\_\_ **New Students**

**Child #1**

Full Name: \_\_\_\_\_ Nick name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade as of 9/1/2019: \_\_\_\_\_

Special needs, health or allergy alerts: \_\_\_\_\_

**Child #2**

Full Name: \_\_\_\_\_ Nick name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade as of 9/1/2019: \_\_\_\_\_

Special needs, health or allergy alerts: \_\_\_\_\_

**Child #3**

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade as of 9/1/2019: \_\_\_\_\_

Special needs, health or allergy alerts: \_\_\_\_\_

*Flip the page to complete the form and to register additional children.*

**Parents' Location:** Please let us know where you plan to be during the Education Hour, Sundays from 10am to 10:45am.

*Circle all that apply:*

Adult Education Class      Fellowship in the Café      Helping in one of the classes

Nursery with younger child      Other: \_\_\_\_\_

**Photo Release:** *I understand that the church will occasionally photograph the Sunday School activities and I give my permission for photos of my child(ren) to be used in the church's efforts to reach out to the community.*

Signature \_\_\_\_\_      Date \_\_\_\_\_

**Additional Information:** *Please use this space to tell us anything else you would like the church to know about your family, and how we can best equip you to pass on the Christian Faith to your child(ren).*