

## Zion Lutheran Church Sunday School Ministry Registration 2017

Child's name \_\_\_\_\_ Grade completed \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

Parent's name \_\_\_\_\_ Home address \_\_\_\_\_

Home phone \_\_\_\_\_ alternate phone \_\_\_\_\_

Emergency contact person \_\_\_\_\_ relationship to student \_\_\_\_\_

Home phone \_\_\_\_\_ alternate phone \_\_\_\_\_

Food allergies Y N (list) \_\_\_\_\_

Medical concerns Y N (explain) \_\_\_\_\_

People who may pick up the child \_\_\_\_\_

Sunday school teachers have permission to photograph/film the child in any manner or form for any lawful purpose associated with this Sunday school program.

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

*Please bring this form on Rally Day, September 10, or call 805-543-8327 to register*