

Urbandale United Church of Christ
Sunday school Registration 2009-2010

Child's Name: _____

Grade Entering: _____ Date of Birth: _____

Parent/Guardian Name(s): _____

Address: _____

Home telephone: _____ Work: _____ Cellular: _____

If child has 2 homes, list name(s), address and phone:

Please list anyone who is authorized to pick your child up during or after class:

In order to provide your child with a safe, positive experience and to handle any emergency that might arise, please answer the following questions. This information is for your child's teachers and the Ministry Program Coordinator:

Does your child have any health issues we should be aware of?

Does your child have any food or environmental allergies?

Are your child's immunizations and tetanus booster current?

What are your child's strengths?

Is there anything else about we should know about your child in order to provide them with the best Sunday school experience possible?

Parent/Guardian Covenant

I promise to assist my child's Sunday school teachers in providing the best experience possible for _____ by updating this information as necessary. If I am out of the church building during Sunday school, I will let a teacher know where I can be reached.

Signatures(s): _____ Date: _____