

CHURCH SCHOOL REGISTRATION FORM

STUDENT'S NAME

BIRTH DATE

GRADE

PARENT / GUARDIAN'S NAME(S)

STREET ADDRESS

CITY, STATE, ZIP

PARENTS' E-MAIL ADDRESS(ES)

STUDENT'S E-MAIL ADDRESS(ES)

PHONE NUMBER(S)

IS THE STUDENT BAPTIZED?

DATE (IF KNOWN)

IS THE STUDENT CONFIRMED?

DATE (IF KNOWN)

DOES THE STUDENT HAVE ANY SPECIAL NEEDS?

IN WHAT CAPACITY WILL YOU HELP SUPPORT THE CHURCH SCHOOL? EXAMPLES:

TEACHING

SUBSTITUTE

SNACKS

MUSICAL AID

SUPPLIES

DONATIONS

OTHER

ADDITIONAL NOTES: