



901 North J Street
Tacoma, WA 98403
(253) 627-8371

SUNDAY SCHOOL REGISTRATION FORM 2009-2010

Child #1 Name: _____ Nickname: _____
Class: Ages 3-5 Kindergarten - 3rd Grade (minimum age is 6) 4th - 8th Grade

Child #2 Name: _____ Nickname: _____
Class: Ages 3-5 Kindergarten - 3rd Grade (minimum age is 6) 4th - 8th Grade

Mother's contact information:
Name: _____ Telephone: _____
Address: _____
E-mail: _____

Father's contact information: (check if same as above)
Name: _____ Telephone: _____
Address: _____
E-mail: _____

Are you interested in volunteering for Sunday School? (check all that apply)
 Teacher (Ages 3-5 Kindergarten - 3rd Grade 4th - 8th Grade)
 Teaching Assistant (Ages 3-5 Kindergarten - 3rd Grade 4th - 8th Grade)
 Helper (preparing materials during the week and delivering them on Sundays)

Person who will pick up my child(ren): _____

Emergency contact during Sunday School (check one):
 I will be in the church building
 Other: _____

Medical Concerns/Allergies: _____

Is there any other information that would assist us in working with your child(ren)?
(Please use reverse side of this page, if necessary) _____

Please sign below if you give permission for Immanuel Presbyterian Church to use any image (such as photographs and video) of your child(ren) at Sunday School to be used in church publications and publicity.

Name: _____ Date: _____