Registration Form

Parent/Guardian Name _____

Address_____

_____

E-mail Address _____

Phone Numbers: Home _____ Cell _____ Work_____

Emergency Contact: Name _____ Phone _____

Home Church _____

Dismissal Information (Who may pick up this child?)   _____

Child #1   _____

Date of birth _____ Age _____ Last school grade completed _____

Allergies/Medical/Other _____

Child #2   _____

Date of birth _____ Age _____ Last school grade completed _____

Allergies/Medical/Other _____

Child #3   _____

Date of birth _____ Age _____ Last school grade completed _____

Allergies/Medical/Other _____

Child #4   _____

Date of birth _____ Age _____ Last school grade completed _____

Allergies/Medical/Other _____

May Sunset United Methodist Church use your child(ren)'s photos on its website, newsletter, and bulletin boards?   **Y   N**