

Church of the Good Shepherd

Sunday School Registration 2008/2009

Welcome to Sunday School! We don't want you to miss any of the fun and enriching activities planned for the coming year, so *please fill in this form completely.*

Names of Parents or Guardians _____

Address _____ Zip _____

Phone _____ Email _____

Please check one: Member Newcomer Not sure!

As the parent/guardian of a Sunday School student at Good Shepherd, I understand that I will sometimes be asked to participate in this Ministry.

I would prefer to help with:
(Please check all that apply)

- Classroom activities
- Nursery time
- Special Events
- Wherever I am most needed!

Please let us know about any special needs your child may have (asthma, diabetes, anxiety, etc.). Some Sunday School Classes may share a feast (snack) as part of the curriculum. Please indicate below any food allergies or restrictions we should know about.

Child's Name _____ Nickname _____
Age _____ Date of Birth ____/____/____ Grade as of Sep. 2008 _____
Food Allergies or Special Needs _____

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Please use the reverse side for additional children.

For Office Use:

GP1 _____ GP2 _____ GP3 _____ ARK _____ ALG _____ SN _____