



## Christian Education Registration 2018-19

Please complete one form for each child.

You may return this registration form the church office (Attention Tom Johnson, Education Committee), or bring directly to the Sunday School teacher.

### **Contact Information:**

1. My full name is:
2. My preferred name is:
3. My preferred pronouns are (please circle): she/her/hers, he/him/his, they/their/their's
4. My age and birthdate are:
5. My address is:
6. My phone number is:
7. My parents/grandparents/guardians are:
8. My parent's/grandparent's/guardian's email is:
9. My siblings are:

**Education Information:**

- 10. My grade in school is:
  
- 11. I attend this school:
  
- 12. I have the following allergies/medical concerns:
  
  
  
  
- 13. I have the following learning accommodations:
  
  
  
  
- 14. It is important that you know this about me:

15. My parents/grandparents/guardians might be interested in: (please circle any of the following volunteer opportunities)

Substitute Sunday School Teacher

Confirmation Teacher

Christmas Pageant

Godly Play Teacher

Sunday School Music

Christian Education Admin Support

Other:

**Picture Release:**

\_\_\_\_ Pictures of my child CAN be used in Calvary publications and social media

\_\_\_\_ Pictures of my child CANNOT be used in Calvary publications and social media

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Signature of parent/guardian