

2018-2019 Trinity SUNDAY SCHOOL Registration Form

Preschool through Grade 5

\$20.00 Registration Fee (\$50.00 Maximum) CK#_____ Date_____

Date:_____ 2018-19 Grade in School _____ School District _____

Student's Full Name _____
(First Name) (Middle Name) (Last Name) (Nickname)

Home Address _____

Town, State, Zip Code _____

Phone Number _____ Home e-mail address _____

Date of Birth _____ Age _____

Would you child like to be involved in Youth Club? _____

Child's Baptismal date _____ Place of Baptism _____

Allergies: _____

Special medical needs? _____

Special learning needs? _____

Indicate any information which may be helpful to us as we plan for your child's Christian education.

Siblings names and ages _____

*******IMPORTANT** Please complete Side 2*****

Check your preference of Sunday School Session: Saturday evening at 5:00 p.m. _____

Sunday mornings at _____ 9:00 a.m. or _____ 10:30 a.m.

Parent/ Legal Guardian Information

Father's name _____	Mother's name _____
E-Mail Address _____	E-Mail Address _____
Occupation _____	Occupation _____
Address, if different from student's _____	Address, if different from student's _____
_____	_____
_____	_____
Daytime Phone # _____	Daytime Phone # _____
Evening Phone # _____	Evening Phone # _____
Cell Phone # _____	Cell Phone # _____
Member of Trinity Lutheran (circle one) Yes or No	Member of Trinity Lutheran (circle one) Yes or No
If membership is elsewhere, give name and address of congregation.	If membership is elsewhere, give name and address of congregation.

PLEASE NOTE: Parent help is always needed. If you would like to volunteer to help with our Sunday School program and other activities, please check below:

I would like to teach Sunday School	_____
I am able to substitute teach	_____
I would like to lead a 2-week workshop	_____
I can play the piano	_____
I would like to help with Youth Club	_____
Other	_____

Please contact me: Name _____

Daytime # _____ Evening # _____

The best day and time to contact me is _____

For office use only

Fee	Class	2018 Env. #	2019 Env. #
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**Please return registration form and check to: Trinity Lutheran Church
P.O. Box 1056
Rocky Point, NY 11778**