



*2009-2010 Sunday School Registration*

Child's Full Name \_\_\_\_\_

Name Child Prefers to be Called \_\_\_\_\_

Child's Birth Date \_\_\_\_\_ Grade \_\_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Allergies, Special Needs, Etc. \_\_\_\_\_



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