



Inclusive, Inquisitive, Intentional, Intimate, Inspiring
The Other Evangelical
www.evangelicalucc.org

Registration form for the 2011-2012 Church School year!
(Note: Please complete one form for each child.)

Name of Child/Teen	Birth Date
Address	
Phone	School Grade
Parent/Guardian(s)	
Parent/Guardian(s) Cell Phone(s)	
Family Email	

In case of emergency during Sunday morning or church event, who should we contact other than parent/guardian listed above?		
Name:	Phone:	Relation:

Does your child have food allergies or other special needs that we should be aware of?

Pick up (choose and complete one):
<input type="checkbox"/> My child will be picked up in the classroom by:
<input type="checkbox"/> Other:

How would you like to be involved this year:	
<input type="checkbox"/> Storyteller (specify best dates):	<input type="checkbox"/> Christmas Pageant
<input type="checkbox"/> Welcome Table Host (specify best dates):	<input type="checkbox"/> Snacks
<input type="checkbox"/> Learning Team	<input type="checkbox"/> Room Decorations
<input type="checkbox"/> Event Planning	<input type="checkbox"/> Center Helper
<input type="checkbox"/> Room Decorations	<input type="checkbox"/> Sub
<input type="checkbox"/> Bulletin	<input type="checkbox"/> Other (specify):

Signature:	Date:
------------	-------