

St. Luke's Episcopal Church

Sunday School Registration Form (please print)

Parents Name (s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Last Father Mother

Address: \_\_\_\_\_  
Street  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
City State Zip Code

Telephone #: Home ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

1) Child's Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Special Interest or needs: \_\_\_\_\_

2) Child's Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Special Interest or needs: \_\_\_\_\_

3) Child's Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Special Interest or needs: \_\_\_\_\_

4) Child's Name: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Special Interest or needs: \_\_\_\_\_

If additional listings are needed, staple extra page to this sheet.

If photos are taken of your child/children during youth events, may we place them on the church web site? Yes or No (circle one)