



Saint James Episcopal Church, Monkton Sunday School Family Registration Form 2011-2012 Program Year

1. Child's Name _____ Nickname _____

Child's Date of Birth ____/____/____ Grade _____

2. Child's Name _____ Nickname _____

Child's Date of Birth ____/____/____ Grade _____

3. Child's Name _____ Nickname _____

Child's Date of Birth ____/____/____ Grade _____

Parent(s)/Guardian(s) Name(s) _____

Address _____

Phone # _____ E-mail _____

Allergies or other conditions we should be aware of (food reactions, physical limitations, etc.)

Emergency contact (name & phone #) _____

All parents must assist at least once during the year in order to assure the success of our program. Please check all that apply. (M = Mother/ F = Father)

M F

As a teacher

As a helper

With Crafts

With Music

Available Dates:

Age group interest: