

2016 - 2017 Sunday School Registration  
First Lutheran Church - DeKalb  
10:30-11:30 a.m. Sunday morning after worship service

1.

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Child's name	gender	DOB	Tiny tots (ages 2-3) / Pre-K or K / Grade
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Are there any allergies, health considerations, or other special needs?

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2.

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Child's name	gender	DOB	Tiny tots / Pre-K or K / Grade
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Are there any allergies, health considerations, or other special needs?

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3.

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Child's name	gender	DOB	Tiny tots / Pre-K or K / Grade
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Are there any allergies, health considerations, or other special needs?

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4.

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Child's name	gender	DOB	Tiny tots / Pre-K or K / Grade
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Are there any allergies, health considerations, or other special needs?

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Parent / Guardian names:

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Address \_\_\_\_\_

Phone(s) \_\_\_\_\_

Email \_\_\_\_\_

Emergency contact: (name & phone)

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I authorize the following individuals, in addition to the parents / guardians above, to pick up my children from Sunday School and other children's church activities:  
(please print) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ date: \_\_\_\_\_

My permission is granted for classroom teachers, leaders, and First Lutheran staff to obtain medical attention in case of illness or injury to my child. Also, I understand that as a participant, my child may be photographed during church activities and these photos / videos may be used in promotional materials and/ or the website. I, the undersigned, do hereby release and forever discharge all sponsors and First Lutheran Church, DeKalb, from any and all claims, demands, actions, or case of action, past, present, or future arising out of any damage or injury while participating in First Lutheran Church activities.

Parent / Guardian Signature: \_\_\_\_\_ date: \_\_\_\_\_