

**St Paul's Episcopal Church
Sunday School Registration 2010-2011**

Student's Name _____

Date of Birth _____

School / Grade _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ (C) _____

Parent's Names _____

Parent's Email _____

Children's Hobbies/Interests _____

Allergies? Please Specify _____

Are there any spiritual, financial or specific needs your family or child has?

Parent's Signature _____ Date _____

Do we have permission to put your child's photograph on the church website/Facebook?

Signature _____ Date _____

St Paul's Sunday School begins Sept 12th, 2010 and ends May 22nd, 2011. Classes begin at 10am.
Children will be expected to participate in communion during the service.

Would you like your child to receive communion? Circle Yes or No