

2019-2020 CHILDREN'S FORMATION REGISTRATION
Children 3yrs- Fifth (5th) Grade

Please use a SEPERATE form for EACH CHILD

Child's Full Name: _____ Birth Date: _____ Grade: _____
Name your child prefers to be called: _____ Age: _____

Parent(s) Name(s): _____ Home Phone: _____
Address: _____ State: _____ Zip Code: _____
Email Address*: _____ **Cell Phone:** _____

*Please be sure to give us your preferred email address as this is the predominate form of communication.

Other siblings also enrolled in Sunday Formation: (name & grade)

Which school does your child attend during the week? _____



In case of illness or emergency, we will call the cell phone number listed above. Is there a better way to contact you? _____

Any medical conditions or allergies we need to be aware of? (Especially dietary for snacks)

Any learning differences or other information that would be helpful _____

If you are *new* to All Saints' Episcopal Church, where did you attend before, and did you participate in their Sunday school program? _____



It is our hope that all parents of children in the program will engage in and support Children's Formation by volunteering in any of the following areas:

- Sunday school teacher for the _____ (age/grade) class.
- Substitute teacher for the _____ (age/grade) class.
- Classroom helper _____ (age/grade) class.
- Children's Classroom Guild—Beautifying classrooms outside of formation hour.
- Nursery Guild—Seasonal organizing and disinfecting the nursery.

Child's Involvement (Acolyte & Choir):

- My child is interested in serving All Saints' as an acolyte
- My child is interested in the Children's Choir

YOUR CHILD AND MEDIA EXPOSURE

In the course of Christian Formation activities, All Saints' staff and volunteers and/or the news media occasionally wish to interview, photograph, or videotape students and/or make public their names, work, or likeness in print, on television, radio, or by electronic means such as the Internet. This includes but is not limited to Sunday school classes, summer day camp, the *Saints' Alive!* publication, and the All Saints' website. Please indicate below your preference to have your child published in the media. (All Saints' cannot control media coverage of events that are open to the public.)

_____ I **DO** give permission. _____ I **do NOT** grant permission to have my child published in the media.
Signature _____ Date: _____