Name:	
Birthdate:	Age:
Baptism date: (if applicable)	School year:
Parent's/Guardian name:	
	Postal/Zip code:
Phone:	·
Parent's/Guardian name:	
	Postal/Zip code:
Phone: (if different)	· · · · · · · · · · · · · · · · · · ·
E-mail address:	
Child's special interests and activities:	
Any allergies?	
Cibiliana attantina abanda abanda	
Siblings attending church school?	
Names/Ages:	
Emergency contact during church sch	ool hour:
☐ I will probably be in the churc	h building
□ Other	
If church school is in need of help in tl	ne following area give me a call:
□ Driving	☐ An extra pair of hands if someone away
☐ Telephoning	□ Prayer support
☐ Donate supplies	□ My suggestion
□ Shop for supplies	
• •	☐ Sorry, I am unable to help at this time