



Damascus United Methodist Church

Sunday School Registration Form

(Please fill out one form per student)

Student's Name: _____ Today's Date: _____

Birthday: _____ Age: _____ Sunday School Grade: _____

Parent(s) Names: _____

Phone numbers

Home _____ Cell _____

Other _____

Email Address: _____

Home Address: _____

Allergies: _____

For children 3rd grade or younger, who will pick up the child after Sunday School or what arrangements have you made with your child that will generally be followed?

Other concerns / comments: _____

Emergency Contact: _____ Phone # _____

Signature: _____ Date: _____