



2017-18 Bethlehem Lutheran Church Sunday School Registration

Please complete and submit to the church office
by Friday, **September 8, 2017!**

Questions? office@blcfairport.org or 585-223-0634

Grow in Faith and Discipleship

Child's Name: _____

Address: _____

City, State Zip: _____

Preferred Phone Number: _____

Birth Date: _____ Age: _____ Baptism Date (if known): _____

Grade for 2017-18 School Year: _____

Please list allergies (food or otherwise): _____

What else would you like to tell us about your child? _____

Parent/Guardian Contact(s): _____

Name/Relationship to child	Phone	email
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Emergency contact or others who may pick child up from Sunday School

Name	Phone	Relationship to child
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How might you be willing to help with BLC Sunday school this year? (please check all that apply)

- Contribute to the 'snack fund'
- Teach or help in a classroom (circle one): Weekly On Occasion
- Assist with the Children's Christmas Program
- Assist with Family Advent Crafts and Activities
- Assist with VBS
- Other: _____

*****Have more children to register? See reverse to add their names, ages and pertinent info!*****

Child's Name: _____

(only complete this box if info is different than page 1)

Address: _____

City, State Zip: _____

Preferred Phone Number _____

Birth Date: _____ Age: _____ Baptism Date (if known): _____

Grade for 2017-18 School Year: _____

Please list allergies (food or otherwise): _____

What else would you like to tell us about your child? _____

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Name/Relationship to child

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Child's Name: _____

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