

St. Anne's Episcopal Church Sunday School Registration Form 2018-2019

Child's Name	Age on Sep 1	Grade	Date of Birth

Parent Name _____ Email _____

Address _____ City _____ Zip _____

Home Phone _____ Mobile phone _____

Emergency Contact Person/Phone _____

Any medical conditions/special needs/allergies, etc.?

All students Grades 2 and below will remain in the classroom until picked up by a parent
or other authorized person.

Other than parents, who has permission to pick up your child?

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____