

Today's Date _____

Last Name _____

2016 ~ 2017 Epiphany Sunday School Registration

Please return to: Epiphany Parish, 62 Front St., Walpole, MA 02081 ~ Attn: Christian Education

Welcome to Epiphany's Sunday School Program! We are excited to have your children participate in our program. Please take a few minutes to complete the information below and remember that all parents are welcome and encouraged to choose a Sunday during the year to assist with Sunday School. Thank you for sharing your children with us ☺

Please contact Jennifer Hee, jenhee29@hotmail.com or Jane Giovannucci, jgiovannucci@comcast.net with any questions or concerns regarding Sunday School.

Contact Information: If we have your information on file from a previous registration you may leave this section blank.
Parent(s) Name(s):
Address:
Phone:
e-mail:
Epiphany member? ___ Yes ___ No ___ Please send me information about joining Epiphany.

Registrant Information: Please provide the following information for each child in your family:

Child's Name	Grade (Fall 2016)	Birth date (mm/dd/yy)	Nursery Care (age 3 and under)	Sunday School (age 4 - grade 8)	

Please check if you have a need for nursery services (i.e. children less than 4 yrs. of age) and list name(s) and birth date(s) above.

Is there anything we should know to help us ensure the best possible experience for your child? This information will be kept confidential. (Please include any learning disabilities, teaching style preference (visual, audio, tactile), physical limitations, allergies, or relevant custody arrangements.): _____

What do you want your child(ren) to gain from Sunday School?

Occasionally we photograph children at Epiphany and use the photos, without identifying children by name, in Epiphany publications or on our website. Please indicate below:

_____ Yes. You may use photographs of my child(ren) in publications or on the website.

_____ No. Please do not use photographs of my child(ren).

Parent/Guardian Signature

Date

Parent Volunteers ~ Our Safe Church policies require that we always have a minimum of two adults at all children's and youth activities. Please consider volunteering with this important ministry. Consider one of the tasks listed here or contact a member of the Christian Education Committee for other opportunities.

I am available to help...

as a teacher (or substitute teacher)

as a parent helper in the classroom

with the Christmas pageant

with Sunday School outreach programs

PERMISSION TO PARTICIPATE

I hereby give my permission for the above named child(ren) to participate in the 2016 ~ 2017 Epiphany Sunday School program. I understand that I am required to remain at Epiphany Church while my children attend Sunday School unless other arrangements have been made in advance.

Parent/Guardian Signature

Date

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If children divide time between two households, please complete:

Parent(s) Name(s) _____

Street Address _____

City _____

Phone _____

E-mail _____

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OFFICE USE ONLY

DATE RECEIVED: _____

PARISH DIRECTORY: _____

ENTERED IN SYSTEM: _____