

Foundry United Methodist Church

2008-2009 Children's Sunday School

Registration Form

Name(s) of Child(ren)	Date of Birth	Grade '08-'09 Year
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____

Which worship service does your family attend? 9:30am 11:00am Both

Please list special needs or concerns (including any food, medication, insect sting allergies or physical or emotional conditions/limitations that might affect your child's participation in Sunday School):

Parent/Guardian Information

Name(s) _____

Address _____

Home phone _____ Work phone/s _____

Cell phone(s) _____

Preferred E-mail Address _____

Are you or your child new to Foundry? Yes No

Would you like to receive regular E-mail updates about our Children and Families Ministry activities? Yes No

Would you like to be involved in helping plan Children and Families Ministry activities, or volunteering as an occasional substitute teacher in the children's area?

Yes No If yes, which age/grade level? _____

Thanks for taking time to answer these questions and joining our exciting ministry