

SUNDAY MORNING REGISTRATION FORM

Child's First Name _____ Child's Last Name _____

Child's Birthday _____ Child's Grade in School _____

Name of School _____ Email _____

Home Phone Number _____

Address _____ City _____ Zip _____

Parents Names: Mother _____ Cell Phone Number _____

Parents Name: Father _____ Cell Phone Number _____

Parent Location during Child's Sunday School _____

For Children in 2nd-5th Grade: Children in 2nd thru 5th grade are allowed to sign themselves in on Sunday mornings and leave at the end of the hour without a parent picking them up, if the parents give their permission. Please indicate your preference below.

- My Child may leave Sunday School at the end of class without a parent.
- I will return promptly to pick up my child by 10:40 or 12:10 from the Gym.

For children in 1st grade and younger: Child will be picked up by a Parent (or sibling) from their SS classroom.

- Parent
- Sibling If Sibling must be 2nd grade or above Name of Sibling _____

Siblings? Name and Birthdates, please for each..... _____

List and Describe any allergies or intolerances:

Is there anything we should know that will help us minister more effectively to your child?

WAIVER:

I/We give permission for Westlake Hills Presbyterian Church to share with my/our Sunday School teacher (s) and WHPC staff any medical or other information that would help them minister more effectively to my/our child(ren).

I/We give permission for WHPC to use my/our child(ren's) name(s) or photos in promotional materials (publications, website or in publicity regarding various activities of WHPC. I hereby waive the right to inspect or approve finished photographs or the use to which it may be put or the copy of illustrations used in connection therewith.

By checking the box above I/We indicate my/our consent with the above Publicity Release statement.

Parent Signature _____ Date _____