

First Lutheran Church
Christian Education Registration
2017-2018

We, as a church and as parents, make promises before God regarding the faith development of our children at their baptisms. The Christian Education Committee at **First Lutheran Church** takes these promises very seriously and believes home and church *must* work together to nurture the children's faith development. We look forward to working alongside you in helping your child(ren) grow in faith at First Lutheran Church this school year.

Parent/Guardian Information:

Parent/Guardian Name(s) _____ Email _____

Address _____ City _____ State _____ Zip _____

Primary Phone _____ wk home cell _____ wk home cell

Other Phones _____ wk home cell _____ wk home cell

Emergency Contact Person/Phone _____

Student Information:

3 years old – 5th grade

<u>Child's Name</u>	<u>Baptized</u>	<u>Birthday</u>	<u>Age on 9/1/16</u>	<u>Grade</u>	<u>School</u>	<u>Allergies/Special Needs</u>
	Y or N					Y or N
	Y or N					Y or N
	Y or N					Y or N
	Y or N					Y or N

Student Information:

6th – 8th grade

<u>Child's Name</u>	<u>Baptized</u>	<u>Birthday</u>	<u>Grade</u>	<u>Cell Phone</u>	<u>Texts?</u>	<u>School</u>	<u>Allergies/Special Needs</u>
	Y or N				Y or N		Y or N
	Y or N				Y or N		Y or N
	Y or N				Y or N		Y or N

Student Information:

Allergy and/or Special Needs Information

<u>Child's Name</u>	<u>Allergy</u>	<u>Special Needs</u>

Serving in the Christian Education Program:

Please check any that apply:

Sunday School

Coordinator _____
 Co-Coordinator _____
 Preschool Level Teacher _____
 Preschool Level Helper _____
 Elementary Teacher _____
 Elementary Shepherd _____
 Music Helper _____
 Substitute _____

LIFE Night

Coordinator _____
 Co-Coordinator _____
 Preschool Level Teacher _____
 Preschool Level Helper _____
 Rotational Teacher _____
 Rotational Helper _____
 Music Helper _____
 Elementary Shepherd _____
 Substitute _____

Confirmation

Small Group Guide _____
 Substitute Guide _____
 Weekly Prep of Materials _____
 Special Activities Helper _____
 Faith Mentor _____

Your family's primary attendance choices:

My child(ren) will primarily attend (please check all that apply):

- _____ Sunday School (3 year olds – 5th grade) 9:10 – 10:10AM Sunday
 _____ LIFE Night (3 year olds – 5th grade) 6:45 – 7:45PM Wednesday
 _____ Confirmation (6th – 8th grade) 6:50 – 7:50 PM Wednesday

Medical and Photography Release Statements:

I(We), the parent(s) or legal guardian(s) of _____ give permission for our child(ren) to attend and participate in activities at First Lutheran Church and receive medical treatment if necessary. Every effort will be made to contact me in an emergency. However, if I (we) cannot be reached, I (we) give my (our) permission to First Lutheran Staff to secure the services of a licensed physician to provide necessary care, including anesthesia, for my child's well being. I (we) also release and agree to hold harmless First Lutheran Church and all its participants from any and all liability. I (we) assume all risk of injury, damage or expense as the result of participation in any activities.

Parent/Guardian Signature _____ Date _____

I(We), the parent(s) or legal guardian(s) of _____ DO NOT give permission to First Lutheran Church to use any photographs/videos of my child(ren) taken during activities affiliated with First Lutheran Church in any future promotional materials (newspaper, brochures, church website, Facebook, etc.)

Parent/Guardian Signature _____ Date _____