St. Luke's Sunday School Registration/Emergency 2021-2022

Last:			First:		Grade:
Birthdate:			Baptism Date	: <u></u>	
Medical issues/allergies:	NO	Yes	Description:		
Lives with:	Father	Mother	Both	Other	
Last:			First:		Grade:
Birthdate:			Baptism Date	:	
Medical issues/allergies:	NO	Yes	Description:		_
Lives with:	Father	Mother	Both	Other	
Last:			First:		Grade:
				:	
Medical issues/allergies:	NO	Yes	Description:		
Lives with:	Father	Mother	Both	Other	
Last:			First:		Grade:
Birthdate:			Baptism Date	: <u></u>	
Medical issues/allergies:	NO	Yes	Description:		
Lives with:	Father	Mother	Both	Other	
Preferred method of confinent Number Email	tact:			Authorized to pick u	p child(ren) Preschool-2nd grade:
Messenger/Facebook Other:	Yes	No			
Father/Caregiver: Address:					
			Cell Phone		
Mother:Caregiver: Address:					
Home Phone:			Cell Phone		
Emergency Contact:					
Relationship:			Phone:		
I give my permission for t	he staff of St	Luke's Sunday S	school to handle		·
emergency contact can't	be reached. S	Signature:		Date:_	
May St Luke's use this chi Yes No Pai				cations, including the	