

Bonhomme Children's Sunday School Registration Form

2018-2019

For children 2 years by 7/31/18 through entering 5th Grade

(Please Print)

FAMILY INFORMATION

Parent's Name _____

Address _____ City _____ Zip _____

Home Phone _____ Mom's Cell # _____ Dad's Cell # _____

Mom's Email _____ Receive Children's Ministry Emails?

Dad's Email _____ Receive Children's Ministry Emails?

| Child's Name | Gender (Please circle) | Fall 2018 Grade | Birthday (month, day, year) | School attended |
|--------------|---------------------------|--------------------|--------------------------------|-----------------|
| _____ | F M | _____ | _____ | _____ |
| _____ | F M | _____ | _____ | _____ |
| _____ | F M | _____ | _____ | _____ |
| _____ | F M | _____ | _____ | _____ |

MEDICAL AND SPECIAL INFORMATION: Are there any allergies or medical conditions we should be aware of? If so, please describe. Are there any conditions or behavior issues that we should know about so that we can best provide assistance for a positive Sunday school experience? If so, please describe.

Child's Name: _____

Child's Name: _____

Child's Name: _____

PHOTOGRAPHIC CONSENT: Enrollment authorizes Bonhomme to photograph your child for print, video, or electronic imaging. I understand these images may be used in promotional materials for Bonhomme and will be the sole property of Bonhomme.



BONHOMME
WHERE FAITH GROWS