



All Souls' Episcopal Church
Children's Sunday School Registration
2019-2020

Child's Name: _____

Child's Birthdate: _____ Grade: _____

Parent's Name(s): _____

Address: _____

Telephone No.: _____ *e-mail: _____

ALLERGIES: _____

(*for notification of special events)

Parent(s)/Grandparent(s) PLEASE let us know how you would like to assist with children's Sunday school! (chapel monitor, class assistant, substitute teacher, help with craft preparations, special projects)

(PLEASE SEE Page 2 FOR PHOTO CONSENT AND RELEASE FORM)

Photo Consent and Release

The children's ministry of All Souls' Episcopal Church takes many pictures of children throughout the year to illustrate the various activities that we have, both in the classroom (or nursery) and out (large group, outside of chapel, playground, etc.). Some of the photographs may be used on our church website, bulletin boards or other church displays and slideshows. The children's names are not used when displayed on the website, as well as *most all* occasions when they are used for our church display purposes. Please let us know your preference:

_____ I grant permission for the children's ministry of All Souls' Episcopal Church to electronically record my child's image during activities, which may appear in the forms described above.

_____ I do not give my permission for the children's ministry of All Souls' Episcopal Church to electronically record my child's image during activities, except when an individual picture is being taken and printed for use with a craft (e.g., special card, etc.)

Child's Name: _____

Parent's Name: _____

Parent's Signature: _____ Date: _____