



FIRST PRESBYTERIAN CHURCH OF ISELIN

Sunday School Registration Form

2018-2019 Program Year

Sunday school at First Presbyterian is held on Sundays
from 10:30 a.m. to 12:00 noon, September—June
for children pre-K through 9th grade

Child's Name _____ Nickname _____

Parent(s) or Guardian(s) Name(s) _____

Child's Date of Birth ____/____/____ Grade in school (or age) for '18-'19 _____

Address _____

Phone # _____ Household e-mail Address _____

Allergies or other conditions we should be aware of (food reactions, physical limitations, ADD/ADHD, etc.)

Emergency contact (name & phone #) _____

I am available to help. . .

By writing your initials in the box at left you authorize Sunday school staff to include photos of your child on our website and in the church newsletter.

As a substitute teacher

As a parent helper in the classroom

With outings and events

As a provider of refreshments

Comments: _____

I, the undersigned parent or guardian, do hereby authorize emergency medical, dental, health or hospital services be rendered to my child upon consent of a First Presbyterian Church of Iselin staff member or designated volunteer. The purpose of this authorization is to permit my child to receive emergency medical attention when needed while involved in the activities connected with the First Presbyterian Church of Iselin's Christian Education programs when I or my emergency contact is unavailable to give such consent. This authorization shall be effective from September 2018 through June 2019.

Signature of Parent or Guardian _____ Date ____/____/____