

# St. Andrew Sunday School Registration

Child \_\_\_\_\_  
(Last Name )      (First Name)      M/F      Age      Birthdate      Grade

Child \_\_\_\_\_  
(Last Name )      (First Name)      M/F      Age      Birthdate      Grade

Child \_\_\_\_\_  
(Last Name )      (First Name)      M/F      Age      Birthdate      Grade

Child \_\_\_\_\_  
(Last Name )      (First Name)      M/F      Age      Birthdate      Grade

Mother \_\_\_\_\_ Father \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ email \_\_\_\_\_

Additional Information (i.e., allergies, special needs, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date enrolled: \_\_\_\_\_ Member #: \_\_\_\_\_