## St. Cuthbert's Sunday School Registration 2023-2024

Family Name:	Phone No:	
Address:		
City:, B.C. Postal Code:		
Contact email address:		
Child's name:	Birth date:	Grade:
ALLERGIES:		
Baptized? Yes ( ) No ( ). Receives		
Child's name:	Birth date:	Grade:
ALLERGIES:		
Baptized? Yes ( ) No ( ). Receives		
Child's name:	Birth date:	Grade:
ALLERGIES:		
Baptized? Yes ( ) No ( ). Receives		
Parents' or Guardians' name(s):		
1. Would you be interested in <b>oc</b>	casionally distributing the snack? teaching/substituting?	
	being a class helper?	
activities, for example the Chr become part of our church bul	ctures of the children engaging in varioristmas Pageant or Christian Theme Daletin board display, used in a special processor, or to enhance our St. Cuthbert classes.	ys. These photos may roject, be part of a Sunday
Do you consent to having your	child photographed for this purpose?	Yes ( ) No ( )
3. How would you like to receive ( ) via email or ( ) by pr	e Sunday School notices? Please check inted copy	cone.
4. Do you consent to having your ( ) Yes ( ) No	r email shared with your child's Sunda	y School teacher?
Signature of parent or guardian	Dota	