



First United Methodist Church of Palatine

f a i t h F I R S T

Sunday School Registration Form

PLEASE RETURN one form per child to the Church Office

Student's Name: _____ Nickname: _____

Birth date: _____ School: _____ Gender: M F

Parent or Guardian Names: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Alternate Number/s: _____

Email Address: _____ (please print legibly)

NOTE: We plan to send Sunday School email updates, newsletters and information from Sunday school teachers to the email address listed above.

FUMC Church Member: YES NO

Where can we locate you during Sunday School Hour if needed in emergency? _____

Photo Release

I DO / DO NOT **(circle one)** want my child in photos of Children's Ministries activities. Photos may be used on bulletin board or on church web site. Children will not be identified in photos for these uses.

Tell us about ...

Brothers/Sisters:

Name: _____ Birthdate _____

Name: _____ Birthdate _____

Name: _____ Birthdate _____

Special Hobbies/Interests/Sports: _____

Special Needs/Learning issues: _____

Food or other Allergies: _____

Situations in your child's life or other information that teachers should be aware of:

PARENTS: please read and sign top half of back page ➔



f a i t h F I R S T Sunday School

We want to promote a safe environment for our children. As part of our Reducing the Risk policy, we are following the guidelines of neighboring school districts and have a policy of formal sign-in and sign-out for every student in our care. Any child that is placed in our care hour must be signed in at the beginning of Sunday School and then signed out by a parent or other responsible adult (see waiver below) at the end of the session.

For students in grades 3 and up, there is the option of self sign-out. If a signature is on the registration form below and it is on file, the student may be released to meet their parent at a designated spot. **NOTE:** Please arrange a safe and designated meeting place with your child if you are allowing them to self sign-out, as our church is large, and we do not want any child to be lost or leave the building on their own.

Please note that Sunday School begins at 9:00 am and ends following the 9:00 service.

Child Sign-Out Waiver

Child's Name: _____ Grade: _____

_____ May be picked up by the following **adults** (please list names - no siblings under 18):

_____ Has my permission to leave Sunday School to meet me after class (**3rd Grade-6th Grade Only**)
We have discussed a place to meet and how to be safe in all areas of the church.

* Parent Signature: _____ Date: _____

Form Updates-fill in annually or with changes

Annual review to have child's name added to current attendance list. Please list any changes in contact information, related health history (especially food allergies) or any information that would help your child have a good Sunday School experience.

Date: _____ Parent Signature: _____

Update Information: Grade _____ Other Updates _____

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Update Information: Grade _____ Other Updates _____

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Update Information: Grade _____ Other Updates _____
