## St. John's Lutheran Church Sunday Morning Christian Education Registration Form

## Classes are held September- May

(please complete one form per family—return to Sonya Sowards)

Last Name:\_\_\_\_\_\_Best phone number for family:\_\_\_\_\_

\ddress:				
Best email for fa	amily:			
Best way to con	ntact your family dur	ring the week:	□ email (default) 🗆 text	: to
			u.S. mail □ telephone	e call to
Adults:				
<del>rauits</del> .	B. L. C L. C			
Name	Relationship to Child	Cell phone	Email	During the Christian Ed hour I would like to:
				☐ Help with children's program
				$\square$ Join the following adult group
				☐ Help with children's program
				$\square$ Join the following adult group
				☐ Help with children's program
				$\square$ Join the following adult group
<u>Children:</u>				
Name		Birth date	Grade & School	Medical concerns/allergies

Emergency Contact for Sunday Morning When In Pe	erson:	
Name:		
Cell Number or location within the Church:		
Well Child Policy:		
1. Children over the age of 2 who are unvaccinat *This is subject to change based on new infor 2. Children must be symptom free from the follocoming to class:	ed should wear a mask.  mation or regulations.*	
• Fever of 100 or higher	• Sore throat	
Vomiting or diarrhea     Need desires at that is green on valley.	• Open sores	
<ul><li>Nasal drainage that is green or yellow</li><li>Rash</li></ul>	<ul><li>Cold</li><li>Excessive coughing</li></ul>	
Pink eye or other eye infection	• Lice	
Do you give permission for St. John's to take and website, Facebook page and/or other publications?		
I (we) do for myself (ourselves) and on behalf of discharge, and agree to forever hold harmless. Pennsylvania Synod, the ELCA, the employees, and the and demands for personal injury, sickness and death nature whatsoever which may be incurred by myself child (ren)'s participation in Sunday School. Further years of age) hereby assume all risk of said personal result of participation as above set forth. I (we) am (aparticipant(s), and hereby grant my (our) permission school. I (we) also release the participant's name(s) synod and ELCA-related entities, and that photos/property of the synod and can be used for ELCA-related.	St. John's Lutheran Church, the Southeastern the agents thereof, from any and all liability, claims in, as well as property damage and expenses, of any in (us) or my (our) child(ren) resulting from said in I (we) (and on behalf of our child(ren) under 18 injury, sickness, death, damage, and expenses as a are) the parent(s) or legal guardian(s) of this (these) in for him/her/them to participate fully in Sunday as part of an information database for our church, videos produced by the church or synod become	
Signature of parent/legal guardian and date	Signature of parent/legal guardian and date	