

2016-2017 Sunday School Registration Form
Wesley United Methodist Church of Dover, DE
(Nursery-12th Grade)

Family Information:

DATE: _____

Please fill in **ALL** the required information: It is important that we receive this information on each child for the church data base.

Last Name: _____	Father's Name: _____
Address: _____	Mother's Name: _____
City: _____	State: _____ Zip Code: _____
Phone: _____	Cell Phone: _____
E-Mail Address: _____	
We are a new family to Wesley Church Yes _____ No _____	

Student Information

Child 1: _____ Birthdate: ____/____/____ 2015-2016 Grade: _____
Special Info: List any allergies and/or prescribed medications: _____

Child 2: _____ Birthdate: ____/____/____ 2015-2016 Grade: _____
Special Info: List any allergies and/or prescribed medications: _____

Child 3: _____ Birthdate: ____/____/____ 2015-2016 Grade: _____
Special Info: List any allergies and/or prescribed medications: _____

Child 4: _____ Birthdate: ____/____/____ 2015-2016 Grade: _____
Special Info: List any allergies and/or prescribed medications: _____

I'd like to help out in Sunday School as a:

- Rotation Teacher
- Classroom Assistant
- Nursery Helper

UMC Photo Release - September 2016-June 2017

Wesley UMC occasionally has the opportunity to use photos to promote the Sunday School ministry, children's choirs and other church activities. Uses might include the website, church newsletter, display board, press releases, ext. No names will be used on the website or in press releases. I give Wesley UMC permission to include my child(ren) in photos used for informational or promotional purposes.

Signature _____