



# Sunday School Registration Form

## Holy Cross Lutheran Church

15885 Los Gatos-Almaden Road, Los Gatos, CA 95032

Registration can be mailed or dropped off at the church office

**Please list your children below:**

Name (First Middle Last): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Baptism Date: \_\_\_\_\_  *Check here if you would like a pastor to contact you about Baptism?*

Child resides with:  Both Parents  Mother  Father  Other \_\_\_\_\_

Grade Level: \_\_\_\_\_ School Name: \_\_\_\_\_

This child is interested in (check all that apply):  Good News Club  Joy Singers  Children's Bell Choir

Allergies or other medical conditions: \_\_\_\_\_

Special learning or physical needs: \_\_\_\_\_

Other helpful information about your child: \_\_\_\_\_

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This child is interested in (check all that apply):  Good News Club  Joy Singers  Children's Bell Choir

Allergies or other medical conditions: \_\_\_\_\_

Special learning or physical needs: \_\_\_\_\_

Other helpful information about your child: \_\_\_\_\_

## Family Information

Mother's Name (First Last) \_\_\_\_\_

Father's Name (First Last) \_\_\_\_\_

Are you a member of Holy Cross?

- Yes Do we have your correct address & phone in the church directory? If not, please update below:
- No Please provide the following information:
  - Check here if you would like a pastor to contact you about joining our church.*

Mailing Address: \_\_\_\_\_

City, Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Father's Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Best way to contact you (may check more than one):  Home phone  Cell phone  E-Mail

How would you like to receive our **Kids of the Kingdom** newsletter?  E-Mail (electronic)  Mail (paper)

## Volunteer Help

Holy Cross's Sunday School thrives because of the many people that volunteer their time, gifts and talents to make it work. There are many ways to be involved. Please consider how you may be called to serve. Any help would be greatly appreciated, whether for every Sunday or for a few times during the year. If you would like to help, please let us know which area(s) you may be able to assist with:

- |   |   |
|---|---|
| <input type="checkbox"/> Providing treats                                   | <input type="checkbox"/> Helping with Christmas or Easter programs                |
| <input type="checkbox"/> Set up of classroom furniture before Sunday School | <input type="checkbox"/> Helping with music                                       |
| <input type="checkbox"/> Set up of chairs for Opening                       | <input type="checkbox"/> Praying for Sunday School students and staff             |
| <input type="checkbox"/> Substitute teaching                                | <input type="checkbox"/> Sunday School database input                             |
| <input type="checkbox"/> Helping with a craft                               | <input type="checkbox"/> Assisting with the <b>Kids of the Kingdom</b> Newsletter |
| <input type="checkbox"/> Taking photographs                                 | <input type="checkbox"/> Other talents/gifts I have to share:<br>_____            |
| <input type="checkbox"/> Testing memory verses                              |   |

## Permission to Use Photos

During the year, photos will occasionally be taken in our classes or events. Your children may be in these photos. These photos could then be used in any means within the church, such as our Kids of the Kingdom newsletter or on Holy Cross Lutheran Church's website for our Children's Ministry. We wish to respect your privacy. Please check your preference and sign below:

- Do NOT use any photos of the child(ren) on this application in any print or electronic publication.
- I grant Holy Cross Lutheran Church or anyone authorized by the church, permission to take photographs of the child(ren) on this application. I understand that all photos are owned by the church. I agree that Holy Cross Lutheran Church reserves the right to use these photographs in any of its print or electronic publications.

I have read and understand the above:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This form completed by:  Mother  Father  Other: \_\_\_\_\_