



# St. James United Church of Christ Religious Education Registration Form 2024-2025

Date \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Siblings (ages) \_\_\_\_\_

Address street city state zip code

Home Phone # \_\_\_\_\_ email \_\_\_\_\_  
Cell Phone # \_\_\_\_\_

Date of Baptism \_\_\_\_\_ Date of Confirmation \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Occupation \_\_\_\_\_

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Allergies \_\_\_\_\_  
\_\_\_\_\_

Special Needs, Concerns \_\_\_\_\_  
\_\_\_\_\_

### PHOTO PERMISSION

Permission is granted for photos to be taken of this minor and used internally (bulletin boards, Sunday worship bulletins, newsletters, etc.) and externally (as part of St. James UCC's promotional materials, website, and social media). Please clarify if you would like identifying features (face) and name excluded.

Yes \_\_\_\_\_ No \_\_\_\_\_

Yes \_\_\_\_\_ with exceptions of \_\_\_\_\_

Permission is granted for the Program Leaders and/or Youth Leaders to text youth in regards to events or reminders.

Yes \_\_\_\_\_ No \_\_\_\_\_ Youth Cell# \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

PLEASE TURN OVER • MORE ON BACK

**The success of our Sunday School and Church programming relies on volunteers. How can you as the student's parents help in our Religious Education program? Please CIRCLE those areas you might be interested in helping out with.**

Teacher	Assist in Classroom	Substitute Teach	
Special Programs	Youth Fellowship	Infant/Toddler Care	
Music	Plays/Musicals		
<b>Events:</b>	Pageant	Advent Workshop	Welcome Sunday

**Please use space below to share any pertinent information you feel we should have about your child and/or family. Information will be shared with Religious Education staff on a need to know basis to ensure the well-being of your child while at Sunday School. Thank you!**