

Attendance Record:  
1. \_\_\_\_\_  
2. \_\_\_\_\_

For Office Use Only	
Grade Assignment	_____
Registration Date	_____

**BRECKSVILLE UNITED METHODIST CHURCH SUNDAY SCHOOL REGISTRATION RECORD**

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Child's Home Phone #: \_\_\_\_\_ Grade for 2008-09: \_\_\_\_\_

Child's Address: \_\_\_\_\_ Zip Code \_\_\_\_\_

Best Email Contact Address \_\_\_\_\_

List allergies or other special needs of child: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Which parent should we contact in case of emergency? \_\_\_\_\_

Siblings' Names & Birthdates: \_\_\_\_\_

Where will parent be during Sunday School generally?

- In BUMC building generally
- Off premises

Best method to reach me during Sunday School hour:

- Home Phone
- Cell Phone

**If your child (3 years - 2nd grade) will sometimes attend Sprouts: please check this box**

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