



Trinity Lutheran Church

2011-2012 Sunday School Registration

Please share this registration form with any friends who may be interested our Sunday School program.

Please register my child(ren) for Trinity Lutheran Church's 2011-2012 Sunday School program.

Child's Name: _____

Child's Birthdate: _____

Child's Grade: _____

Child's Name: _____

Child's Birthdate: _____

Child's Grade: _____

Child's Name: _____

Child's Birthdate: _____

Child's Grade: _____

Parent(s) or Guardian(s): _____

Current Address: _____

Main Phone: _____ Secondary Phone: _____

E-mail: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

_____ I am interested in volunteering with the Sunday School program.

If you have any special requests or concerns regarding your child, please discuss this directly with your child's teacher. Thank you!

Parent signature: _____

Please return form to Trinity Lutheran Church, 346 W. Pine St, Lake Mills, WI 53551 by the beginning of Sunday School. Forms can be mailed or returned anytime to baskets in the Gathering Space.