

**FIFTH AVENUE PRESBYTERIAN CHURCH  
FAMILY MINISTRIES**

**STUDENT REGISTRATION FORM**

**Registration Info:**

**Date:** \_\_\_\_\_

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

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birth date: \_\_\_\_\_ Grade in school this September: \_\_\_\_\_

Baptized?  No  Yes Year: \_\_\_\_\_ Confirmed?  No  Yes Year: \_\_\_\_\_

Please sign my child up for choir (grades 1-12)  No  Yes

***Mother***

***Father***

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Home telephone: \_\_\_\_\_

Home telephone: \_\_\_\_\_

Work telephone: \_\_\_\_\_

Work telephone: \_\_\_\_\_

Cell number: \_\_\_\_\_

Cell number: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

FAPC member?  No  Yes

FAPC member?  No  Yes

Is there anything we should know about your child (allergies, other medical conditions, etc, educational challenges, family issues)?

**Family Volunteer Opportunities:**

I understand that all families are asked to participate to make Sunday School a success for all our children. Please call me regarding one of the following volunteer opportunities:

- |  |  |                                     |
|--|--|-------------------------------------|
| <input type="checkbox"/> Classroom Teacher   | <input type="checkbox"/> Refreshments        | <input type="checkbox"/> Help Desk  |
| <input type="checkbox"/> Classroom Assistant | <input type="checkbox"/> Welcoming committee | <input type="checkbox"/> Choir Help |
| <input type="checkbox"/> Office Work         | <input type="checkbox"/> Welcoming Parent    |                                     |
| <input type="checkbox"/> Events              | <input type="checkbox"/> Nursery             |                                     |

Parent Signature: \_\_\_\_\_

(over)

**Dismissal authorization:**

Unless other written instructions are given, my child, \_\_\_\_\_ ,  
will be regularly picked up from the Sunday School classroom by:

Or \_\_\_\_\_

**Note: It is expected that each child will be picked up, promptly following the end of the worship service.**

*Optional for Children in grades 3 and higher is the following:*

I grant my child, \_\_\_\_\_ , permission to leave Sunday School unaccompanied at the end of class. I understand that by signing this permission form, my child becomes my responsibility once s/he leaves the classroom.

Adult Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Photo Release agreement:**

As part of the normal activities of our program, photographs are taken and periodically used for promotional and marketing purposes, and for church publications. If you object to the use of your child's photograph, please check here \_\_\_\_.