



Registration Information

2019-2020

6th - 12 Grade

Sunday's Thrive Education Class 9:15-10am

Student Info

Student Name: _____
(as it should appear on other formal documents)

Student likes to be called: _____

Student Birthdate: _____ grade: _____

Student Address: _____

City: _____ zip _____

Student email: _____ Cell: _____

Parent Info

Parents Name: _____

Parent Phone number: _____

Parent Cell number: _____ Can you receive text _____

Parents email: _____

Parents address (if different from student)

*Optional -We will have a sign-up sheet to bring a treat on Sundays.

Revised 7/19 -SH