

**2020-2021 VELC Sunday School Registration Form**  
**Ages 3 through 5<sup>th</sup> grade**

Please complete 1 registration form per child. Return to the Education mailbox at church with a check for \$15 per child or \$30 per family. Scholarships available, please contact Kay Johnson at education@vernon-elca.org

If you are interested in volunteering to help during Sunday School please contact Kay at education@vernon-elca.org

**Student's Name:** \_\_\_\_\_

**Birth date:** \_\_\_\_\_ **Grade level in 2020:** \_\_\_\_\_

**Medical allergies or special needs:** \_\_\_\_\_

Parent or guardian's names: \_\_\_\_\_

Home address: \_\_\_\_\_

Parent's phone: \_\_\_\_\_ Parent's email: \_\_\_\_\_

Adults authorized to pick up child after class: \_\_\_\_\_

As the parent of the above named child, I understand that all students are expected to follow rules of courtesy, respect and safety. In the uncommon event that there is a medical emergency and I am unavailable, I give permission to VELC staff/volunteers to obtain all necessary emergency treatment for my child. Vernon Evangelical Lutheran Church is hereby released from all responsibility to pay for such services. I agree that the Church and all associated with the Church are relieved of all liability in the event of an accident or injury.

I give \_\_\_\_\_, do not give \_\_\_\_\_ permission for photos or videos of my child to be used on the Church website, in the classroom or for Church publicity.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If parent has any other concerns regarding their child's physical or mental health, emotional needs other needs, please explain on the back of this form.

*"See what love the Father has lavished on us, that we are called the children of God."*

1 John 3:1