

**Sunnyvale Presbyterian Church
728 W. Fremont Avenue
Sunnyvale, CA 94087**

Children's Ministry Registration Form

DATE _____

CHILDREN'S NAMES

	LAST	FIRST	Birth Date	Baptism Yes/No	Nursery, Preschool or Current Grade
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

Address _____ Home Phone () _____

City _____ Zip _____

Father's Name _____ Occupation _____

Address (if different) _____ E-mail _____

City/Zip _____ Phone: () _____

Mother's Name _____ Occupation _____

Address (if different) _____ E-mail _____

City/Zip _____ Phone: () _____

We will primarily attend (circle one): 10:00 AM Service 5PM Service Both
(Intersections)

_____ I (We) would be interested in being a part of Children's Ministry

Also, please be aware that your child's picture MAY be used in brochures, bulletin boards or on the church website. If you would prefer we not use your child's picture, please let someone on the Church School Staff know.

Office use only:	Entered in Shelby _____	Welcome Sent/Roster added _____	CC _____
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