

# All Saints' Christian Education Registration Form

## Child Information

1. Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_

Grade for 2019-2020 School Year or Toddler: \_\_\_\_\_

Any allergies All Saints' should be aware of?  
What? \_\_\_\_\_

2. Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_

Grade for 2019-2020 School Year: \_\_\_\_\_

Any allergies All Saints' should be aware of?  
What? \_\_\_\_\_

3. Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_

Grade for 2019-2020 School Year or Toddler: \_\_\_\_\_

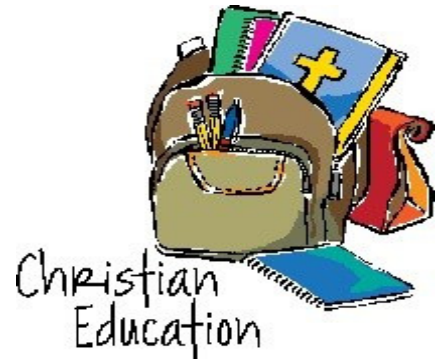
Any allergies All Saints' should be aware of?  
What? \_\_\_\_\_

4. Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_

Grade for 2019-2020 School Year or Toddler: \_\_\_\_\_

Any allergies All Saints' should be aware of?  
What? \_\_\_\_\_



## Parents or Other Relative\* Information

\*Please indicate if parent or other relation (write in relationship, ex grandmother, aunt, cousin, sister, etc.)

Mother's\* Name: \_\_\_\_\_

Mother's Address: \_\_\_\_\_

Mother's Home Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell \_\_\_\_\_

Mother's Email Address: \_\_\_\_\_

Father's\* Name: \_\_\_\_\_

Father's Address (if different): \_\_\_\_\_

Father's Home Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell \_\_\_\_\_

Father's Email Address: \_\_\_\_\_

\_\_\_ I/We would like to help by teaching, assisting, crafts or refreshments? (circle choice)