

**The Lutheran Church of the Good Shepherd
Sunday School Registration Form
2009-2010**

Child's Name _____ Date of Birth _____

Placement this school year:

Age 4 ____ KG ____ 1st ____ 2nd ____ 3rd ____ 4th ____ 5th ____ 6th ____

Parent(s)/Guardian(s) Name _____

Address _____

City, State, Zip _____ Phone Number _____

Email Address _____



Emergency Contact Name and Phone _____

Allergies/medical concerns/special needs (please include food allergies - your child may be taking part in cooking workshops)



Is your child baptized? _____ If not, are you interested in baptism? _____

Would you like to know more about our *Journey of Faith*? _____

Journey of Faith: Those who are new to the Christian faith or returning to faith find this to be a great starting point, as do life-long Lutherans who have been on this journey for years. The truth is, all of us live with questions of faith that we bring to God out of the daily experiences we are having and the unique circumstances of our lives. This is the place to explore those questions and to make new discoveries about yourself.