Trinity Church School Registration 2015-2016

For ages birth to 12th Grade

- Parent/Guardian should fill out this form for your children every year.
- Adults should also fill out Talents/Booster Forms.
- Please take home one Church School Handbook per family to read and keep as a reference.
- Please leave forms in designated box or in Church School Office.
- Thank you, and welcome to Trinity Church School!

For office use only:
To Do *Done*
____ add F to PC _______
____ add S to activity ____
____ add S to family_____
____ cc to Mbrshp _______

PLEASE PRINT CLEARLY! Today's Date_____/_____/_____ Are you new to Trinity? ____yes ____no

1 Parent/Guardian Information: Relationship to student (mother, father, other) ______________________________

Name: ____
LAST FIRST (MIDDLE)

Address ____

Phones: Home____________________ Work______________________ Cell______________________

Email(s): ____

2 Parent/Guardian Information: Relationship to student (mother, father, other) ______________________________

Name: ____
LAST FIRST (MIDDLE)

Address ____

Phones: Home____________________ Work______________________ Cell______________________

Email(s): ____

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1st Student's Name: ____ Nickname __________________________
LAST FIRST (MIDDLE)

Lives with: ____mother _____father _____both _____other____

Date of Birth _____/_____/__________ Age:__________ Sex: ____Male or ____Female

Circle entering class: Nursery Preschool 3s Preschool 4s Kindergarten **OR**

OR Write grade # in school: ____________ School Name____

Student Email: _________________________________ *Student Cell Phone #:* ______________________________

Baptized? ____no ____yes place/denomination ______________________________ date: _____________

Confirmed? ____no ____yes place/denomination ______________________________ date: _____________

Please describe any allergies or health considerations: ____

____

Other information that might be helpful to the teachers: ____

____

CONTINUED ON OTHER SIDE

2nd Student's Name: ____ Nickname ________________________
LAST FIRST (MIDDLE)

Lives with: ____mother _____father _____both _____other____

Date of Birth _____/_____/_________ Age:_________ Sex: ____Male or ____Female

Circle entering class: Nursery Preschool 3s Preschool 4s Kindergarten **OR**

OR Write grade # in school: ____________ School Name_______________________________________

Student Email: _______________________________ *Student Cell Phone #:* ______________________________

Baptized? ____no ____yes place/denomination ______________________________ date: ____________

Confirmed? ____no ____yes place/denomination ______________________________ date: ____________

Please describe any allergies or health considerations: ____

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Other information that might be helpful to the teachers: ____

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3rd Student's Name: ____ Nickname ________________________
LAST FIRST (MIDDLE)

Lives with: ____mother _____father _____both _____other____

Date of Birth _____/_____/_________ Age:_________ Sex: ____Male or ____Female

Circle entering class: Nursery Preschool 3s Preschool 4s Kindergarten **OR**

OR Write grade # in school: ____________ School Name_______________________________________

Student Email: _______________________________ *Student Cell Phone #:* ______________________________

Baptized? ____no ____yes place/denomination ______________________________ date: ____________

Confirmed? ____no ____yes place/denomination ______________________________ date: ____________

Please describe any allergies or health considerations: ____

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Other information that might be helpful to the teachers: ____

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Trinity Safety/Photo Covenant:

I/We have read or will read the 2015-2016 Trinity Children/Youth Ministries Handbook and will follow the Safe Church Policies therein (also posted on the Church School bulletin board).

Parent/Guardian Signature(s): ______________________________________Date _____/_____/_____

I/We hereby give permission for this parish to use group photos of my child(ren) withOUT their name(s) in parish publications, on the parish website, and on parish-related social media for parish-sponsored activities.

Parent/Guardian Signature(s): ______________________________________Date _____/_____/_____