



Bethany UCC - Randolph, VT - 728-5849

# Sunday School Registration

Date: \_\_\_\_\_

Child's full name	Nickname	Date of Birth	Grade	Age	Sex
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## Parent/Guardian Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact(s) Name	Phone	Other Phone
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Allergies/medical information or other concerns:

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