



LCM Sunday School Registration 2008-09

Sunday School Times and Locations ~ Please choose the one you will *regularly* attend.

East Campus (114th & Center)

West Campus (180th & Dodge)

_____ 10:15 - 11:10 a.m.

_____ 10:15 - 11:10 a.m.

* Please contact Diana Streckfuss at **333-4444 (office)** or 660-3641 (cell) if you should have any questions.

1 Student Information

Name _____ Birthdate _____ Age ____ Sex ____ Grade _____

Member of LCM? Yes No Medic Alert? Yes No If yes, explain _____

Student baptized? Yes No Special Needs? Yes No If yes, explain _____

2 Student Information

Name _____ Birthdate _____ Age ____ Sex ____ Grade _____

Member of LCM? Yes No Medic Alert? Yes No If yes, explain _____

Student baptized? Yes No Special Needs? Yes No If yes, explain _____

3 Student Information

Name _____ Birthdate _____ Age ____ Sex ____ Grade _____

Member of LCM? Yes No Medic Alert? Yes No If yes, explain _____

Student baptized? Yes No Special Needs? Yes No If yes, explain _____

4 Student Information

Name _____ Birthdate _____ Age ____ Sex ____ Grade _____

Member of LCM? Yes No Medic Alert? Yes No If yes, explain _____

Student baptized? Yes No Special Needs? Yes No If yes, explain _____

Please list any siblings under 3 years old/over 5th grade: _____

Parent/Guardian Information

Parent/Guardian Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Cell _____ E-mail _____

Members of LCM? Yes No Would you like information about becoming a member? Yes No

*** We invite you to be a part of our ministry. Please indicate area(s) you would like to volunteer for:**

_____ Teacher Grade preferences? 1st Choice _____ 2nd Choice _____ 3rd Choice _____

_____ Substitute Teacher _____ Children & Family Ministry Team

_____ Nursery Volunteer _____ Special Programming (Christmas Program, VBS)

_____ Administrative Helper _____ Summer Leader/Assistant