

2011-2012 PATH Registration

Please complete all sections of this registration form to enroll your child(ren) into PATH.

Parents' Names _____

Address _____


This is a new address.

House  _____ Parent #1 Cell _____ Parent #2 Cell _____

Preferred Email _____

Child Name	Age	Entering Grade as of Sept. 2011	Allergies	Special Needs

Emergency Contact Information (other than contacts above):

Contact Name: _____ : _____

Relationship to Children: _____

I am enrolling my child(ren) into PATH Sunday School at Holy Shepherd Lutheran Church. The above information is correct to the best of my knowledge. If information changes I will contact the church office to update my record.

Parent Signature _____

Parent support is critical to the success of The Path. We want you involved. Please volunteer for the following. Feel free to mark more than one opportunity :

<input type="checkbox"/> Teaching	<input type="checkbox"/> Welcoming new children	<input type="checkbox"/> Science lessons
<input type="checkbox"/> Crafts	<input type="checkbox"/> Snacks	<input type="checkbox"/> Cooking lessons
<input type="checkbox"/> Christmas Program	<input type="checkbox"/> Writing lessons	<input type="checkbox"/> Lead games
<input type="checkbox"/> Parent Communication	<input type="checkbox"/> Prep materials for class	<input type="checkbox"/> Help w/ service projects
<input type="checkbox"/> Registration	<input type="checkbox"/> Read stories w discussion	<input type="checkbox"/> Other: _____