



GALILEE LUTHERAN CHURCH

4652 Mountain Road
Pasadena, MD 21122



SUNDAY SCHOOL REGISTRATION

Last Name: _____ Parents First Name: _____

Address: _____ Home Phone: _____

_____ Cell Phone: _____

Alternate Adult*: _____ Alt Phone: _____

YES! Add us to the Sunday School e-mail list! Our E-mail is: _____

* Alternate Adult are adults over 18 years old who may pick up your child from Sunday School in an emergency.

We are Members of Galilee: Yes No, but would like to become one No Thanks.

Child's Name (First & Last)	Childs Birth date (MM/DD/YYYY)	Grade in School	Baptized?
			Y / N
			Y / N
			Y / N
			Y / N
			Y / N
			Y / N

Allergies or Medical Conditions we should know about (put child's name by respective issue):

PHOTO/VIDEO RELEASE

YES - I am the parent or legal guardian of the above listed children under 18 years of age and I give permission for their images to be used within the church building, in church publications, in news releases, community awareness programs and on the church website. I also give permission for the use of their images on the websites of those charitable organizations we serve with the church's permission.

NO - I am the parent or legal guardian of the above listed children under 18 years of age and I DO NOT give permission for their images to be used

NOTE: Photos and Video used on the Galilee website will NOT contain your child's name. However, the newsletter is published with a copy on the Galilee Website and it may contain your child's name.

Parent/Guardian signature: _____ Date: _____