



SUNDAY SCHOOL REGISTRATION

1800 Twin Ridge Road, Lincoln, NE 68506

Vinechurch.ucc@gmail.com • 402-483-4781

Sunday School Registration for age 4 – grade 5

(one form per child)

Child's Name _____ Date _____

Address _____

Child's DOB _____ Age _____ School Grade _____

PARENT/GUARDIAN INFORMATION

Name #1 _____

#1 Email Address _____ Home Phone _____ Cell Phone _____

Name #2 _____

2 Email Address _____ Home Phone _____ Cell Phone _____

PERFERRED COMMUNICATION METHOD (reminders and other communication)

Name _____ ☐ Text ☐ Email

SPECIAL INSTRUCTIONS

Food or Other Allergies? ☐ Yes ☐ No _____

Any Special Needs? _____

EMERGENCY CONTACT INFORMATION (if unable to reach parent/guardian)

Name _____ Phone #1 _____ Phone #2 _____

Photo Media Release

I grant permission to Vine UCC to take photos of my child(ren) during Sunday school and to use these images in church publications, website, and/or social media. I understand that photos will never be accompanied by captions or tags that include names or any other identifying information.

Parent/Guardian Signature: _____ Date: _____