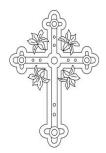
ST LUKE'S CHILDREN/FAMILY MINISTRY REGISTRATION FORM



Mother's Name _____

Cell Phone_____

St. Luke's Episcopal Church

P.O. Box 605

Gladstone, NJ 07934

Father's Name _____

Cell Phone_____

Home Phone		Home Phone		
Email Address		Email Address		
Please fill-in the below information for each child who will be attending Children's Ministry this year.				
Ages/Sunday School Grades	Child's Name	Grade in 2015	Birthday	Allergies
NURSERY (Ages 0-2)				
Pre-K (Ages 3 & 4) & K (Age 5 & 6)				
1 st and 2nd Grades				
3rd and 4 th Grades				
5 th and 6 th Grades				
7 th Grade Pre- confirmation				
al.				
8 th Confirmation				

Do you give St. Luke's Church permission to take photos of your family during church events or during

classes that will be used on the church website or in church publications? Yes_____ No _____