



2017 ST. PAUL'S COMMUNION CLASS REGISTRATION FORM

All Baptized Children aged 1st Grade and up are welcome

Child's Full Name _____

Child's Date of Birth _____

Parent/Guardian(s) Names _____

Parent Email Address _____

Approximate Date of Child's Baptism _____

My child will participate in the Communion Celebration at the 9am Service on April 2nd
Please Circle One Yes No

I/We will attend the Parent Communion Class/Clergy Forum on March 26 at 10:10am in the Chapel
Please Circle One Yes No
Number of Parents attending 1 2 3 4 or more

Parent's Signature

I, _____, parent/guardian of _____ grant
permission for my child to attend Communion Classes on March 12, 19 and 26 from
10:10am-11:00am. I understand that attendance at each class is important and will do my
part to make sure my child attends each class.

Parent Signature

Date

Child's Signature

I, _____, will participate in Communion Classes on March 12, 19
and 26 from 10:10am-11:00am. I will be respectful to the clergy, my teachers, parent
volunteers and other class members and will abide by St. Paul's Children's Ministries
Behavior Expectations Policy.

Child's Signature

Date

Please return signed forms to Christine Ingram prior to March 5, 2017 . Thank you!