

Tower Hill Church

Sunday School Registration

Please submit completed form to our Children's Ministry team – deeann@towerhillchurch.org

Family Name _____ Home Phone _____

Father's Name _____ Cell Phone _____ Email _____

Mother's Name _____ Cell Phone _____ Email _____

Address _____ Town _____

Children live with: Mother ____ Father ____ Both ____ Other _____

Are you a member of this church? Yes ____ (Father ____ Mother ____ Both ____) No ____

Do you have a preferred service? 9:00 ____ 10:30 ____ No preference ____

Child's Name	Gender	Birth Date	Age	Grade	Baptized	Allergies
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

If I cannot be reached to approve emergency medical care, the paid church staff is authorized to make emergency care decisions in my absence

Signature: _____

Does your child(ren) have any Special Needs or Significant Family situations? Please explain so we can provide the best experience to your child(ren).

There are times throughout the year that we may photograph the children for use within the church or on the church website. No names will be associated with the children. If you do not wish your child(ren)'s photo used in slide shows or on the web, please let us know or we will assume we have your permission.



We always welcome Children's Ministry Volunteers!

Here are some volunteer opportunities within our Children's Ministry program. Please check off the area you would like to be involved with:

_____ **Sunday School:**

9:00am Primary Preschool Nursery

10:30am Primary Preschool Nursery

_____ **Kids Klub**

4th and 5th Grade Youth Group. Meets
Thursday evenings 5:30-7:00 PM

How would you like to be contacted? (please circle)

Cell text home phone email other _____

Parent Signature

Date



Tower Hill First Presbyterian Church
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www.TowerHillChurch.org