



Immanuel Lutheran Church
600 4th Street SW
Crosby, MN 56441
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www.immanuelcrosby.org

Sunday School Registration Form 2020-2021

One Registration Form per Family

Name _____ If Child: Age _____ Date of Birth _____

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Will parents/guardians be interested assisting with Sunday School activities? Yes No

Parent/Guardian Name _____

Address _____ City _____ State _____ Zip _____ Home Phone _____

Cell _____ Email _____

Allergies/Medical Conditions (please state who and what):

Emergency Contact _____ Phone _____ Relationship _____

Who will be responsible for picking your child up from Sunday School? _____

Relationship? _____

Do you give permission for the church to use a photo of your child in church publications and social media?

Yes No

**** If your child is experiencing symptoms and/or fever above 100 F, please do not send to Sunday School.**

Should your child become ill while attending Sunday School, a parent/guardian will be alerted, and instructed to pick up child immediately.