



**CHILDREN /YOUTH
SUNDAY SCHOOL REGISTRATION FORM
NEWTOWN UNITED METHODIST CHURCH
2021 - 2022 School Year**

Student's name: _____

Age: _____ Grade (Fall 2021): _____ Birthday (Month/Day): ____/____

Address: _____ City: _____

_____ State: _____ Zip: _____ Phone #: _____

Cell #: _____

Parent's/Guardian's Signature: _____

Contact Email Address: _____

Allergies & Other Considerations: _____

Will you permit the Church to include your child in photos of group activities which may be posted from time to time on the Church's web site or Facebook page? Yes: _____ No: _____ (No student names will be used with any photos.)