

Trondhjem Lutheran Church
7525 Garfield Avenue
Lonsdale, Minnesota 55046

Email: office@tronluth.org
Church Office: 507-744-2310
www.trondhjemplutheran.org

Sunday School Registration 2016 -2017

Parent(s) or Guardian(s) _____

Address _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____
(Email will be our primary means of communication.)

Family Members attending Sunday School:

Name _____
Male / Female Grade _____ Birth Date _____ Baptism Date _____

Name _____
Male / Female Grade _____ Birth Date _____ Baptism Date _____

Name _____
Male / Female Grade _____ Birth Date _____ Baptism Date _____

Name _____
Male / Female Grade _____ Birth Date _____ Baptism Date _____

Please list an emergency contact in case a parent/guardian cannot be reached during the Sunday School hour.

Name: _____ Phone: _____

Allergies or other conditions leaders should know about your child:

As the parent or legal guardian of my child/children, I hereby consent for my child to attend and participate in all activities provided as described above.

Parent/Guardian Signature

Date

*** Return to the church office***