

ST. MATTHEW LUTHERAN CHURCH, HAWTHORN WOODS

SUNDAY SCHOOL ENROLLMENT FORM

Please complete one (1) per child and return to the Church Office by August 31st, 2018.

Sunday School will resume on Sunday, September 9, 2018.

Child's Name: _____

Street Address: _____

City & Zip: _____

Email Address: _____

Home Phone: _____

Cell Phone: _____

Church Affiliation: _____

Baptismal Date: _____

School Attending: _____

Grade (as of September 2018): _____

Birthday: _____

Siblings: _____

Special Interests of Child: _____

Special Needs or Allergies (if any): _____

Father's Name: _____

Mother's Name: _____

Address (if different from child's)

Address (if different from child's)

Street: _____

Street: _____

City/Zip: _____

City/Zip: _____

Phone: _____

Phone: _____