



**Prince of Peace Lutheran Church, Inc.**

10250 Haynes Bridge Road  
Johns Creek, GA 30022  
(770) 475-4250  
(770) 475-5834 (fax)

**Sunday School Registration -- 2017-18**

**Student Information**

Student's Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Gender M\_\_\_\_\_ F\_\_\_\_\_  
Grade \_\_\_\_\_ School \_\_\_\_\_  
Baptism Date \_\_\_\_\_ Confirmation Date \_\_\_\_\_  
Email \_\_\_\_\_ Cell \_\_\_\_\_  
Siblings / Ages \_\_\_\_\_

**Parent / Guardian Information**

Parent/Guardian Name (1) \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_ Cell \_\_\_\_\_  
Parent/Guardian Name (2) \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_ Cell \_\_\_\_\_

**Medical Information (In case of Emergency)**

Allergies \_\_\_\_\_  
Physical Limitations  
or Medical Needs \_\_\_\_\_  
Special Instructions/  
Other Concerns \_\_\_\_\_

**Additional Information**

During the Sunday School hour, parent(s) will be: *(Circle all possible locations)*  
\_\_\_\_ Adult Sunday School Class      \_\_\_\_ Harmony House      \_\_\_\_ Fellowship Hall  
\_\_\_\_ Elementary Class      \_\_\_\_ Sunday School Class      \_\_\_\_ Nursery  
\_\_\_\_ Other \_\_\_\_\_

Please note any concerns about who has permission to pick up your child from the Sunday School class.

Please use the back of this sheet to provide any other information the Sunday School teachers need to know about your child.

By initialing, I hereby authorize the use of photos taken at events which may include my child on the Prince of Peace Web Site \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**Please notify the church office with updates.**