

Saint Mark's Sunday School Registration Form

Child's Name _____

Date: _____

Age (in Fall) _____ D.O.B. _____

Parent(s) Name(s) _____

Phone _____

Grade in Fall _____

Allergies (Please list) _____

Learning Issues/concerns:
(List concerns on back side please) _____

Parent Teaching Responsibility**

Check off any that apply:

____ I would like to teach the whole year. Grade _____

____ I would like to teach half the year _____

Grade _____ (Sept-December or Jan.-June)

I will teach ____ Session(s) Indicate 1st, 2nd, 3rd choice:

____ **Session 1 (Sept/Oct)** _____ **Session 2 (Nov/Dec)**

____ **Session 3 (Jan/Feb)** _____ **Session 4 (March/April)**

____ **Session 5 (May/June)**

Check off any that apply:

____ I only want to teach my child's class

Grade _____

____ I do NOT want to teach my child's class

Grade _____

____ I will teach wherever I am needed

____ I need to speak with Denise to discuss other
options (listed below)

____ I signed up on my other child's form

Grade _____

We need additional help with the following.

We could use as many people who would be willing to help.

Can you to help with:

____ Fall/Spring Parish Night

(dinner & activity) coordinate or help

____ Christmas Pageant— co-coordinate

(Dec. 24th Family Service)

____ Substitute if needed

____ Easter Egg Hunt

____ Lent Activity (evening event)

____ Basket raffles for Harvest Fair

____ Planning Committee

____ Family Coffee Hour (3 or 4)

Help organize, plan small activity for)

**** All parents are expected to teach at least one session.
Parents with more than one child should sign up to
teach 2 sessions. See Denise for alternative arrangements
if necessary.**

Suggestions? (Please use back of form)

THANK YOU FOR YOUR HELP!