



HIGHLAND PARK UNITED METHODIST CHURCH

Nursery/Sunday School Enrollment Card 2008-2009

PLEASE RETURN TO CHILDREN'S INFORMATION CENTER OR MAIL

Child's Name (First and Last) Birth date (m/d/y) Sex (m/f) **Age or Grade as of Sept. 1, 2008**

Family Email Address School attending as of Sept. 1, 2008

Street Address City State Zip Home Phone

Mother's Name Address (If different than child's) Cell Phone

Father's Name Address (If different than child's) Cell Phone

Describe allergies, limitations or special needs, which we should be aware of.

Which hour/hours will your child be attending? (Circle all that apply)

9:30 11:00

Where will you be located during the above hour/hours? _____



HIGHLAND PARK UNITED METHODIST CHURCH

Nursery/Sunday School Enrollment Card 2008-2009

PLEASE RETURN TO CHILDREN'S INFORMATION CENTER OR MAIL

Child's Name (First and Last) Birth date (m/d/y) Sex (m/f) **Age or Grade as of Sept. 1, 2008**

Family Email Address School attending as of Sept. 1, 2008

Street Address City State Zip Home Phone

Mother's Name Address (If different than child's) Cell Phone

Father's Name Address (If different than child's) Cell Phone

Describe allergies, limitations or special needs, which we should be aware of.

Which hour/hours will your child be attending? (Circle all that apply)

9:30 11:00

Where will you be located during the above hour/hours? _____