



THE STORY

Zion Lutheran Church Sunday School REGISTRATION FORM 2017-2018

Jesus said, "Let the children come to me and do not hinder them, for the kingdom of heaven belongs to such as these." Matthew 10:14

Instructions: Type in the requested information, save and email this form to zionlcms@arvig.net OR print the form from your computer and deliver or mail to the Zion office: P.O. Box 926, 1100 Lake Ave, Detroit Lakes, MN 56502
Questions? Call the Zion office using 218.847.7630 *Thank you!*

Family Name

Family Name = last name of family members. If more than one last name, enter Guardian Last Name(s)

Mother/Guardian First Name

Last Name

Father/Guardian First Name

Last Name

Address (Street or P.O. Box)

City

State

ZIP Code

Cell Phone Number

Home Phone Number

E-mail address

Emergency Contact First Name
(other than parent or guardian)

Last Name

Phone Number

Relationship to
Child(ren)

This individual may also pick up your child from Sunday School.

Photographs and video are routinely taken of Sunday School and Vacation Bible School children at Zion for the Zion website and other Zion publications or media. *Displaying real photos of our participants vs. stock images enables us to reflect our ministries authentically and reach others!* Check YES if you give Zion permission to use photos of your child(ren) for this purpose. Check NO if you prefer we not use images of your child(ren). *Thank you!*

YES

No



THE STORY

Student Registration Information 2017-2018

Student #1: First Name

Last Name

Date of Birth (mm/dd/year)

Age

Grade 2017-18

Special Concerns, Allergies and/or
Medical Issues

Student #2: First Name

Last Name

Date of Birth (mm/dd/year)

Age

Grade 2017-18

Special Concerns, Allergies and/or
Medical Issues

Student #3: First Name

Last Name

Date of Birth (mm/dd/year)

Age

Grade 2017-18

Special Concerns, Allergies and/or
Medical Issues

Student #4: First Name

Last Name

Date of Birth (mm/dd/year)

Age

Grade 2017-18

Special Concerns, Allergies and/or
Medical Issues

Student #5: First Name

Last Name

Date of Birth (mm/dd/year)

Age

Grade 2017-18

Special Concerns, Allergies and/or
Medical Issues

If you are registering more than five students for Sunday School at Zion Detroit Lakes, submit an additional form via email or print and complete an additional copy of this Page 2. *Thanks!*



THE STORY

Volunteer Invitation & Information 2017-2018

The Zion Lutheran Church Sunday School Program is only possible because of gracious volunteers. We rely on the involvement of parents and/or guardians to provide quality Christian Education for our children. We encourage you to become involved with this ministry team at Zion.

We appreciate your help and THANK GOD for your gifts of service!

Please check the activities below, with which you and/or your spouse are willing to help. *Thanks!*

Sunday School Team-Teacher (share teaching responsibilities)	Your and/or Spouse Name
Substitute Sunday School Teacher	Your and/or Spouse Name
Childcare Hour (once every 2 months) during Discipleship Hour (Bible Class) for Pre-School age children	Your and/or Spouse Name
Kitchen Help (Sunday School & Family Ministry Events)	Your and/or Spouse Name
Event Setup/Clean Up	Your and/or Spouse Name
Group Opening Devotion	Your and/or Spouse Name
Music & Singing	Your and/or Spouse Name
Children's Programs (example: Christmas and Palm Sunday)	Your and/or Spouse Name
Family Ministry Events (example: Sledding Day, Day at the Beach, Trunk or Treat, Bible Breakfast)	Your and/or Spouse Name
VBS (Vacation Bible School) Ministry (non-Director roles: group leader, guide, crafts, games, meals, etc.)	Your and/or Spouse Name

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You are finished! We appreciate your time and consideration while completing and submitting this information.

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Beginning October 1st, 2017 through April 29th, 2018: Adults and children at Zion will use **THE STORY** curriculum to learn the Bible.

Parents/guardians, you are invited to assist and learn alongside their child as part of the curriculum. Will you join your child in his or her classroom? Please indicate below. Thank you!

I am willing to assist in my child's Sunday School classroom more than once a month.	Yes	No
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