

## 2018 ST. PAUL'S COMMUNION CLASS REGISTRATION FORM

All Baptized Children aged 1st Grade and up are welcome

Child's Full Name	
Child's Date of Birth	
Parent/Guardian(s) Names	
Parent Email Address	
Approximate Date of Child's Baptism	
My child will participate in the Communion Celebration a Please Circle One Yes No	at the 9am Service on May 6 <sup>th</sup> .
I/We will attend the Parent Communion Class/Clergy For Please Circle One Yes No Number of Parents attending 1 2 3 4 or n	
Parent's Signature  I,, parent/guardian of grant permission for my child to attend Communion Classes on April 15 <sup>th</sup> , 22 <sup>th</sup> , and 29 <sup>th</sup> , from 10:10am-11:00am. I understand that attendance at each class is important and will do my part to make sure my child attends each class.	
Parent Signature	Date
Child's Signature  I,, will participate in Communion Classes on April 15 <sup>th</sup> , 22 <sup>th</sup> , and 29 <sup>th</sup> from 10:10am-11:00am. I will be respectful to the clergy, my teachers, parent volunteers and other class members and will abide by St. Paul's Children's Ministries Behavior Expectations Policy.	
Child's Signature	Date

Please return signed forms to Christine Ingram prior to April 1, 2018 . Thank you!