

Sunday School Registration

Family Name:

Parent(s) name:

Child(ren) & Grade Fall 19':

1. _____
2. _____
3. _____
4. _____

Address:

Email:

Phone: Home & Cell:

Allergies:

Can you teach Sunday School? Team Teach? _____

Can you be a Substitute?

Can you help with Christmas Pageant and/or Youth Sunday?

Usher/Serve Coffee Hour on Communion Sunday with your child? (First Sunday of the Month) _____

Return to Kathy Tureski:

90 Meeting House Rd Westhampton, NY 11978
or email: whpresbyterianss@gmail.com