

Sunday School/Confirmation Registration

Westhampton Presbyterian Church, Westhampton Beach, NY

Child's Name: _____ Age: _____ Grade: _____ Birth Date: _____

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Would you like to participate in Confirmation if a class is held? (7th grade & up) _____

Parent/Guardian's Name: _____

Contact #: _____ Email: _____

Parent/Guardian's Name: _____

Contact #: _____ Email: _____

Address: _____

Mailing if different than above: _____

My child's teacher should be aware of the following disability, allergy or medical condition: _____

- The success of our Church School depends upon our volunteers. Please check the ways in which you would be willing to help out:
- Teaching or substitute teaching _____ Assist with Sunday School Activities _____
- Bring Snack for Sunday School Closet _____ Bring/Bake for Special Events _____
- Run/Help with VBS (summer) _____ Other _____

Note: Children in classes PreK through 4th grade shall be released only to the registering parent(s) or to a person authorized by the parent(s). Please list the names of any person authorized to pick up your child on the back of this form. When dismissed 5th grade and up children will be allowed to leave the classroom to return to their parents/ guardians.

Email or send in your registration: whpresbyterianss@gmail.com / Westhampton Presbyterian Church
ATTN: Sunday School 90 Meeting House Rd Westhampton Beach, NY 11978.

I understand that photographs or video of my child (ren) may be taken while he/she is participating in events, activities or classes of the Westhampton Presbyterian Church. WPC will use and display these in WPC created print publications (e.g. Tidings, Bulletin etc.) and other internal mediums. (e.g. bulletin boards & classrooms)

Intial: _____