

TRINITY EPISCOPAL CHURCH , PORTLAND, MAINE
2022-2023 School Year
CHURCH SCHOOL REGISTRATION FORM

Child(ren) Last Name, First Name	Birth Date	Grade entered fall of 2022	Medical problems, allergies, special needs, etc. of which you believe we should be aware.

Parent/Guardian Name(s): _____ Cell # _____

Other # _____

Address: _____ E-Mail: _____

In order to provide a quality Church School program, we need the help of volunteers. Please indicate any areas in which you might be interested in helping to support our Sunday School Program.

Please note if you do NOT want photos taken of your child as part of our church school program by checking here ____. If you are willing to have photos taken, please fill out the photo release form below.

MINOR (CHILD) PHOTO RELEASE FORM

I, _____, the parent or legal guardian of _____ [Child] grant Trinity Episcopal Church of Portland, ME my permission to use photographs taken during Sunday School events and programming for any legal use, including: publicity, copyright purposes, illustration, advertising, and web content. These photos will be used for advertising future events and illustrating the type of fun and meaningful Christian Education offered at Trinity.

Parent/Guardian's Signature: _____ **Date** _____

Parent/Guardian's Name: _____