

# ST. HARALAMBOS SUNDAY SCHOOL 2018-19

Dear Parents of Sunday School Children,

Registration and the first day of classes for our 2018-19 Sunday School year will take place on **Sunday, September 9th**. We look forward to welcoming your children.

**Children will go directly to their classroom to meet their teachers on the first day!**

**\*\*\*\*\* Children must be 3 years old by Sept. 1st for Sunday School. \*\*\*\*\***

**Registration Fees: 1 child--\$30.00 2 children--\$50.00 3 children--\$70.00 4 children----\$80.00**

**Sunday School begins at 9:30 a.m. every Sunday morning!**

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**ST. HARALAMBOS SUNDAY SCHOOL REGISTRATION FORM 2018-19**

**FAMILY INFORMATION:**

Parents \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

NAME OF CHILD	AGE	DATE OF BIRTH	BAPTIZED ORTHODOX NAME	GRADE
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Allergies** \_\_\_\_\_

**Does your child have an IEP in day school?** \_\_\_\_\_

PARENT VOLUNTEERS ARE NEEDED! (Please select all that apply.)

\_\_\_ Yes, I would like to volunteer to co-teach for the 2018-19 Sunday School year.

\_\_\_ Yes, I would like to volunteer to help with programs for the 2018-19 Sunday School year.

\_\_\_ PHOTO/VIDEO I hereby grant Saint Haralambos permission to use photo images or video of the above listed participant/s for the purpose of promoting our church programs in publication and on the Web. I agree that the images and/or video become the exclusive property of Saint Haralambos and wave the rights thereto.

I/We, the parent(s)/legal guardian(s) of the listed child/children above, do give my/our consent and approval for his/her participation in any and all activities of St. Haralambos Greek Orthodox Church 2018-19 Sunday School year. In consideration of my/our child's acceptance in said activities, I/we, the undersigned, do hereby agree to indemnify and hold harmless St. Haralambos Greek Orthodox Church and its directors, officers, coaches & agents, without regard to any negligence on their part, against any claim for damages, compensation or otherwise including all losses and expenses caused to or by my/our child while participating in St. Haralambos' 2018-19 Church programs. I/We consent and give authority to obtain medical care and treatment of any and all injuries as a result of participating in St. Haralambos' 2018-19 Church programs.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fees Paid: \_\_\_\_\_ Date: \_\_\_\_\_