

**Parkwood Presbyterian Church**  
**2025/2026 Church School Registration**

**SIGN ME UP!!**

Child's First Name: \_\_\_\_\_ Child's last name: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date (MM/DD/YY): \_\_\_\_\_

Mailing Address: Apt./unit # \_\_\_\_\_ Street address: \_\_\_\_\_

City/Province/Postal Code: \_\_\_\_\_

Mother's First Name: \_\_\_\_\_ Mother's Last Name: \_\_\_\_\_

Mother's Home Telephone: \_\_\_\_\_ Mother's Cell: \_\_\_\_\_

Mother's E:mail: \_\_\_\_\_

Father's First Name: \_\_\_\_\_ Father's Last Name: \_\_\_\_\_

Father's Home Telephone: \_\_\_\_\_ Father's Cell: \_\_\_\_\_

Father's E-mail address: \_\_\_\_\_

Is there another adult who brings this child? Yes / No \_\_\_\_\_

If yes, specify name: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this child have any allergies? Yes/No \_\_\_\_\_

If Yes, please specify: \_\_\_\_\_

Does this child have any learning disabilities or other special needs? Yes/No \_\_\_\_\_

If Yes, please specify: \_\_\_\_\_

I give permission for my child's/children's photo to be used in the church Pulse, bulletins and/or the Parkwood website.

Date Signed (MM/DD/YY): \_\_\_\_\_ Signature: \_\_\_\_\_