

## CROSS TRAINING STUDENT REGISTRATION, 2009-2010

*Please complete a registration form for each child.* Please return to my mailbox in the church office or via email: [ahenrichs@stmaryslutheran.org](mailto:ahenrichs@stmaryslutheran.org).

Child's name: \_\_\_\_\_

Address: \_\_\_\_\_

---

Home phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Family email: \_\_\_\_\_

Birthdate: \_\_\_/\_\_\_/\_\_\_ Baptism date: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

Names/ages of brothers and sisters: \_\_\_\_\_

### **Special concerns teachers need to know:**

ADHD/ADD: \_\_\_\_\_

Learning disabilities: \_\_\_\_\_ Please explain: \_\_\_\_\_

---

Allergies: \_\_\_\_\_ Please explain: \_\_\_\_\_

Physical/medical or other special needs: \_\_\_\_\_

---

Parent name: \_\_\_\_\_ / Address, if different than above:

\_\_\_\_\_

Parent name: \_\_\_\_\_ / Address, if different than above:

\_\_\_\_\_

Emergency contact—name and phone number: \_\_\_\_\_

\_\_\_\_\_

Person(s) other than Parent/Guardian who may pick up the child:

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

**Parent Helpers:**

We need your help!! Be a part of your child's Cross Training experience! Please indicate which of the following activities you can help with:

Music \_\_\_\_\_ Crafts \_\_\_\_\_ Storytelling \_\_\_\_\_ Special events \_\_\_\_\_

Substitute Teacher \_\_\_\_\_ Other talents to share \_\_\_\_\_

Christmas program:

Planning \_\_\_\_\_ Costumes \_\_\_\_\_ Music \_\_\_\_\_ Rehearsal Supervision \_\_\_\_\_

Other comments or suggestions: \_\_\_\_\_

---

---