

**Student Registration Form**  
**eMpower Sunday School 2009-2010**

Parent(s) or Guardian(s) Name(s):

Last	First	Middle
Last	First	Middle

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

Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Family E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Other Children:

Name	Date of Birth	Grade

In Case of Emergency, please contact:

Name	Relationship	Phone Number
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