Make a difference in the life of our congregation.

Volunteer in the church school and share the gift of your faith.

**Emergency Contact** (if a parent can not be reached)

Last Name: Home Phone:

First Name: Cell Phone:

Address: Business Phone: Ext.

Permitted to pick up student? **Yes No**

**Parent/ Guardian 2 Information**

Last Name:

First Name:

Address:

Home Phone:

Cell Phone:

Business Phone: Ext.

Email(s):

**Parent/ Guardian 1 Information**

Last Name:

First Name:

Address:

Home Phone:

Cell Phone:

Business Phone: Ext.

Email(s):

**Glenview Presbyterian Church School**

**Family Registration**

**2016-2017**