



Grace Free Lutheran Church
SUNDAY SCHOOL FAMILY REGISTRATION FORM

Parent's Names _____

Address _____

Phone: home _____ work _____ cell _____

Email _____

Student's name _____ Birth date _____ Age _____ Grade _____

Student's name _____ Birth date _____ Age _____ Grade _____

Student's name _____ Birth date _____ Age _____ Grade _____

Student's name _____ Birth date _____ Age _____ Grade _____

Student's name _____ Birth date _____ Age _____ Grade _____

Allergies or other medical conditions: _____

Comments/Instructions: _____

Thank you for sending your child (ren) to Grace Sunday School
Please fill out this registration and send it to or drop off in the church office.

Grace Free Lutheran Church
15655 Bass Lake Road
Maple Grove, MN 55311
763-463-2300