

St. Peter Orthodox Church  
Sunday School Registration  
2016 – 2017

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

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

Is student baptized and/or christmated: \_\_\_\_\_

*If student has not been baptized or christmated please contact Fr. Hans.*

Place of baptism/chrisimation: \_\_\_\_\_

Student's baptismal name: \_\_\_\_\_

What grade level is the student at school? \_\_\_\_\_ In Sunday School? \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's name: \_\_\_\_\_

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

City: \_\_\_\_\_ ZIP \_\_\_\_\_

Home phone \_\_\_\_\_ Father's cell: \_\_\_\_\_ Mother's cell: \_\_\_\_\_

Father's email: \_\_\_\_\_

Mother's email: \_\_\_\_\_

+++++

NOTES