

**Duke Memorial United Methodist Church
Nursery & Sunday School Registration from Birth through 4 Years Old**

Today's Date _____

Please list your child/children below to be enrolled in our Sunday School program.

Child's Name	M/F	Current Age	Birthdate 00/00/00	Allergies

Mother's Name: _____ Mother's Cell# _____

Father's Name: _____ Father's Cell# _____

Home Phone _____ Primary Email: _____

My Child (Children) may be included in photos at DMUMC that may appear in published materials without identification (no names). Yes _____ No _____

Because we are a Safe Sanctuary Church, we work to provide nurture and faith formation within a safe environment. Children must be dropped off and picked up by a parent or otherwise designated adult. Children may only be dropped off in a program location with two supervising adults.

Please adhere to these guidelines for the safety of all our children.

Parent Signature _____